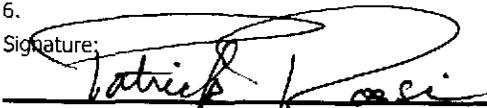


No. W 149799	Due no later than Mar 31, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) PATRICK F ROSSI 145 AUDREY LANE SAGLE ID 83860																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. FAR & AWAY HIGHLAND CATTLE CO. LLC PATRICK F ROSSI 145 AUDREY LANE SAGLE ID 83860		3. <u>New</u> Registered Agent Signature.																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Patrick Rossi</td> <td>145 Audrey Lane</td> <td>Sagle</td> <td>ID</td> <td>Banner</td> <td>83860</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Andrea Jetherton</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Patrick Rossi	145 Audrey Lane	Sagle	ID	Banner	83860	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Andrea Jetherton	"	"	"	"	"	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 149799 </div>		6. Signature:  <hr/> Name (type or print): <u>Patrick Rossi</u> <hr/> Date: <u>4/26/16</u> <hr/> Title: <u>Pres</u>																																					
Issued 04/18/2016 by SLD 101965																																							