

No. W 18730		Due no later than Apr 30, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. WOLVERINE FARMS, L.L.C. MARK A MICKELSEN PO BOX 438 RIGBY ID 83442		MARK A MICKELSEN 396 N YELLOWSTONE HWY IDAHO FALLS ID 83442			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	MARK A MICKELSEN	9088 N RIVER ROAD	IDAHO FALLS	ID	USA	83402	
MANAGER	DALE MICKELSEN	5249 N 5TH W	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: ID W 18730		6. Annual Report must be signed.* Signature: Mark A Mickelsen Name (type or print): Mark A Mickelsen					
		Date: 02/10/2011 Title: Manager					
Processed 02/10/2011		* Electronically provided signatures are accepted as original signatures.					