




No. W 18654		Reinstatement Annual Report Form ADMIN DISSOLVED 07/11/2012		2. Registered Agent and Office (NOT A P.O. BOX) LARRY ROORDA 14040 WILLIS RD CALDWELL ID 83605																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ROORDA DAIRY, LLC 14040 WILLIS RD CALDWELL ID 83605																																						
REINSTATEMENT FEE DUE: \$30.00				3. New Registered Agent Signature.																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																								
<table><thead><tr><th>Manager or Member</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>John Roorda</td><td>511 Center St.</td><td>Paullina,</td><td>IA</td><td>O'Brien</td><td>51046</td></tr><tr><td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>Larry Roorda</td><td>14040 Willis Rd.</td><td>Caldwell,</td><td>ID</td><td></td><td>83605</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	John Roorda	511 Center St.	Paullina,	IA	O'Brien	51046	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Larry Roorda	14040 Willis Rd.	Caldwell,	ID		83605	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: IDAHO W 18654		6. <table><tr><td>Signature: </td><td>Date: 10/2/2012</td></tr><tr><td>Name (type or print): John Roorda</td><td>Title: Member</td></tr></table>				Signature: 	Date: 10/2/2012	Name (type or print): John Roorda	Title: Member																															
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Issued 10/02/2012 by PEH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM