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|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------|---------|------------------|--|
| No. <b>W 85675</b>                                                                                                                                     |               | <b>Due no later than Jul 31, 2013</b>                                                                                                                                                        |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>           |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>SUNRAIN VARIETIES LLC<br>LISA C SWENSON<br>1210 PIERVIEW DR<br>IDAHO FALLS ID 83402<br>USA |             | GREGORY C CALDER<br>2105 CORONADO ST<br>IDAHO FALLS ID 83404 |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                                                                              |             | 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      |  |
| MEMBER                                                                                                                                                 | MEL DAVENPORT | 1210 PIER VIEW DRIVE                                                                                                                                                                         | IDAHO FALLS | ID                                                           | USA     | 83402            |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                                                                            |             |                                                              |         |                  |  |
| <b>DE<br/>W 85675</b>                                                                                                                                  |               | Signature: Lisa Swenson                                                                                                                                                                      |             |                                                              |         | Date: 05/17/2013 |  |
|                                                                                                                                                        |               | Name (type or print): Lisa Swenson                                                                                                                                                           |             |                                                              |         | Title: Treasurer |  |
| Processed 05/17/2013                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                                    |             |                                                              |         |                  |  |