No. <b>W 12188</b>		Due no later than Jun 30, 2017		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			TIMOTHY STOVER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  HIGH PLAINS DAIRY, L.L.C.  TIMOTHY J STOVER PO BOX 1428  TWIN FALLS ID 83303-1428			905 SHOSHONE ST N TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses of	f at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER DAVID CHAF		RLES GANDOLFO	P.O. BOX 780		CASTLEFORD	ID		83321
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Timothy J. Stover			Date: 05/15/2017			
W 12188		Name (type or print): Timothy J. Stover			Title: Registered Agent			
Processed 05/15/2017 * Electronically provided signatures are accepted as original signatures.								