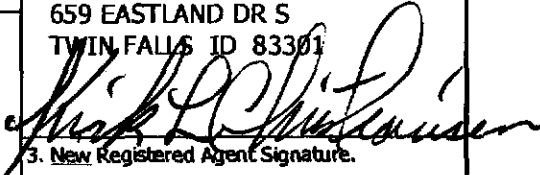



No. W 22230	Reinstatement Annual Report Form ADMIN DISSOLVED 04/08/2005		2. Registered Agent and Office (NOT A P.O. BOX) Kirk L. Christiansen	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CHRISTIENSEN LAND & LIVESTOCK, L.L.C. PO BOX 950 TWIN FALLS ID 83303		659 EASTLAND DR S TWIN FALLS ID 83301  3. New Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. Office Held Name Street or PO Address City State Country Postal Code Member Kirk L. Christiansen PO 950 Twin Falls ID 83301 Twin Falls				
5. Organized Under the Laws of: IDAHO W 22230		6. Signature:  Date: Name (type or print): Kirk Lee Christiansen Title:		
Issued 01/28/2010 by DK1				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.