| No. <b>C 201767</b>  |               | Due no later than Apr 30, 2015  |  |  | 2. Registered Agent and Address (NO PO BOX) |          |         |                |
|--|---------------|---|--|--|---|----------|---------|----------------|
| Return to:   |               | Annual Report Form  |  | WRIGHT BROTHERS LAW OFFICE PLL 1166 EASTLAND DR NORTH TWIN FALLS 83301 |   |          |         |                |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |               | 1. Mailing Address: Correct in this box if needed.  SIERRA VIEW DAIRY SERVICES INC.  C/O WRIGHT BROTHERS LAW OFFICE  PO BOX 266 |  |  |   |          |         |                |
|  |               | TWIN FALLS ID 83303-0266  |  |  | 3. <u>New</u> Registered Agent Signature:*  |          |         |                |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |               |   |  | 7  |   |          |         |                |
| 4. Corporations: Enter Nar   | mes and Busin | ess Addresses of  | President, Secretary, and Directors. T                 | reasurer (   | optional).                                  |          |         |                |
| Office Held  | Name          |   | Street or PO Address                                   |  | City  | State    | Country | Postal Code    |
| PRESIDENT DWAYNE SOUZA<br>SECRETARY DWAYNE SOUZA                                 |               |   | 731 E YOSEMITE AVE STE B1<br>731 E YOSEMITE AVE STE B1 |  | MERCED<br>MERCED                            | CA<br>CA |         | 95340<br>95340 |
| 5. Organized Under the Laws of:  |               | 6. Annual Report must be signed.*   |  |  |   |          |         |                |
| NV<br>C 201767   |               | Signature: Dwayne Souza   |  |  | Date: 04/20/2015                            |          |         |                |
|  |               | Name (type or print): Dwayne Souza  |  |  | Title: President                            |          |         |                |
| Processed 04/20/2015   |               | * Electronically p  | provided signatures are accepted as ori                | ginal sign   | atures.                                     |          |         |                |