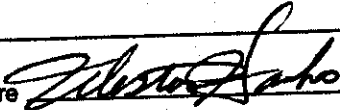


No. W 52549	Due no later than July 31, 2007 Annual Report Form	2. Registered Agent and Office NO PO BOX WESTON HAWKES 1792 S 500 W OAKLEY, ID 83346																		
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable HIGH DESERT FAMILY FARMS, LLC 1792 S 500 W OAKLEY, ID 83346	3. New Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;"><u>Office held</u></th> <th style="text-align: left; width: 25%;"><u>Name</u></th> <th style="text-align: left; width: 35%;"><u>Street or P.O. Address</u></th> <th style="text-align: left; width: 15%;"><u>City</u></th> <th style="text-align: left; width: 10%;"><u>State</u></th> <th style="text-align: left; width: 10%;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>WESTON HAWKES</td> <td>1792 S. 500 W.</td> <td>OAKLEY</td> <td>ID</td> <td>83346</td> </tr> <tr> <td>MEMBER</td> <td>CLINT MUEHLESTEIN</td> <td>155 N. CENTER</td> <td>OAKLEY</td> <td>ID</td> <td>83346</td> </tr> </tbody> </table>			<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGER	WESTON HAWKES	1792 S. 500 W.	OAKLEY	ID	83346	MEMBER	CLINT MUEHLESTEIN	155 N. CENTER	OAKLEY	ID	83346
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MEMBER	CLINT MUEHLESTEIN	155 N. CENTER	OAKLEY	ID	83346															
5. Organized Under the Laws of: IDAHO W 52549	6. <div style="display: flex; justify-content: space-between;"> <div> Signature  Name (Typed or Printed) <u>WESTON HAWKES</u> </div> <div> Date <u>5/12/07</u> Title <u>MGR</u> </div> </div>																			