

|  |                   |  |      |  |         |                  |  |
|--|-------------------|--|------|--|---------|------------------|--|
| No. <b>W 81549</b>   |                   | <b>Due no later than Feb 28, 2014</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>1. Mailing Address: Correct in this box if needed.</b><br><br>BLUE MOON FARMS, LLC<br>DOUGLAS K HALLOCK<br>1241 EAST 4325 NORTH<br>BUHL ID 83316<br>USA |      | DOUGLAS K HALLOCK<br>1241 EAST 4325 NORTH<br>BUHL ID 83316 |         |                  |  |
|  |                   |  |      | 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      |  |
| MANAGER  | DOUGLAS K HALLOCK | 1241 EAST 4325 NORTH   | BUHL | ID   | USA     | 83316            |  |
| 5. Organized Under the Laws of:  |                   | 6. Annual Report must be signed.*  |      |  |         |                  |  |
| <b>ID<br/>W 81549</b>  |                   | Signature: Douglas K Hallock   |      |  |         | Date: 02/24/2014 |  |
|  |                   | Name (type or print): Douglas K Hallock  |      |  |         | Title: Manager   |  |
| Processed 02/24/2014   |                   | * Electronically provided signatures are accepted as original signatures.  |      |  |         |                  |  |