

No. <b>W 171719</b>	<b>Due no later than Sep 30, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MATTHEW WADE 1302 N 1100 E SHELLEY ID 83274				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> GOLDEN MILL ORGANICS LLC MATTHEW WADE 1302 N 1100 E SHELLEY ID 83274		3. <u>New</u> Registered Agent Signature.				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code							
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Matthew Wade 1302 N 1100 E Shelley ID 83274</i>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold; font-size: large;">             IDAHO              W 171719           </div>		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">           Signature: <i>Matthew Wade</i> </td> <td style="width: 50%;">           Date: <i>8-24-17</i> </td> </tr> <tr> <td>           Name (type or print): <i>Matthew Wade</i> </td> <td>           Title: <i>Owner</i> </td> </tr> </table>		Signature: <i>Matthew Wade</i>	Date: <i>8-24-17</i>	Name (type or print): <i>Matthew Wade</i>	Title: <i>Owner</i>
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Name (type or print): <i>Matthew Wade</i>	Title: <i>Owner</i>						
Issued 08/03/2017 by SLD <span style="float: right;">104105</span>							