

No. W 106108	Reinstatement Annual Report Form ADMIN DISSOLVED 11/14/2013		2. Registered Agent and Office (NOT A P.O. BOX) BRADY GARRARD 20 S 350 W JEROME ID 83338
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. 3 G FARMS LLC BRADY GARRARD 20 S 350 W JEROME ID 83338		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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Brady Garrard	20 S. 350 W.	JEROME	ID	USA.	83338
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	LINDSAY GARRARD	20 S. 350 W.	JEROME,	ID	U.S.A.	83338
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-size: 1.2em;"> IDAHO W 106108 </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature: Name (type or print): BRADY T GARRARD </div> <div> Date: 12-1-13 Title: MANAGER/OWNER </div> </div>
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