No. W 150951	Due no later than Apr 30, 2016	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	Annual Report Form 1. Mailing Address: Correct in this box if needed.	KAREN FORSYTHE 207 CEDAR ST			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LEGACY FARMS NW LLC JUDIE CONLAN 315 SAINT CLAIR AVE	SANDPOINT ID 83864-8386 3. New Registered Agent Signature:*			
	SANDPOINT ID 83864-1616				
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MEMBER JUDIE A CO	ONLAN 315 ST. CLAIR	SANDPOINT	ID	USA	83864-1616
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Judie Conlan	Date: 04/13/2016			
W 150951	Name (type or print): Judie Conlan	Title: President			
Processed 04/13/2016	* Electronically provided signatures are accepted as original signatures.				