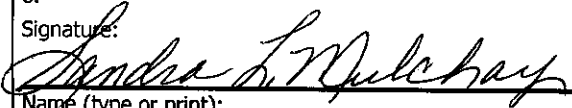
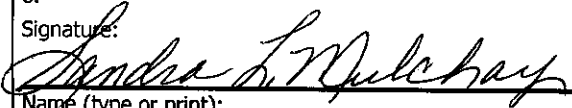
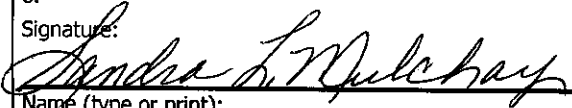


No. W 28364	Due no later than Feb 28, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) SANDRA L MULCHAY 20667 N FRANKLIN BLVD NAMPA ID 83687
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MULCHAY FARMS L.L.C. SANDRA L MULCHAY 20667 FRANKLIN BLVD NAMPA ID 83687 USA <i>20667 N. FRANKLIN BLVD.</i>		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"/>	PAUL M. MULCHAY	20667 N. FRANKLIN BLVD.	NAMPA ID	USA		83687
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	SANDRA L. MULCHAY	20667 N. FRANKLIN BLVD.	NAMPA, ID	USA		83687
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;"> IDAHO W 28364 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  Name (type or print): <u>SANDRA L. MULCHAY</u> </td> <td style="width: 40%;"> Date: <u>12-30-2012</u> Title: <u>MEMBER</u> </td> </tr> </table>	Signature:  Name (type or print): <u>SANDRA L. MULCHAY</u>	Date: <u>12-30-2012</u> Title: <u>MEMBER</u>
Signature:  Name (type or print): <u>SANDRA L. MULCHAY</u>	Date: <u>12-30-2012</u> Title: <u>MEMBER</u>		

Issued 12/27/2012 by KAH
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