





## STATE OF IDAHO Office of the secretary of state, Phil McGrane ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00 For Office Use Only

-FILED-

File #: 0006106020

Date Filed: 2/11/2025 2:59:48 PM

| Entity Name and Mailing Address:   |                   | Spake River Land and Cattle                         | шс           |
|--|-------------------|---|--------------|
| Entity Name:   |                   | Snake River Land and Cattle LLC                     |              |
| The file number of this entity on the records of the Idaho Secretary of State is:      |                   | 0004659772  |              |
| Address  |                   | 1627 W 5500 S                                       |              |
|  |                   | REXBURG, ID 83440-4350                              |              |
| Entity Details:  |                   |   |              |
| Entity Status  |                   | Active-Existing                                     |              |
| This entity is organized under the laws of:  |                   | IDAHO   |              |
| If applicable, the old file number of this entity of the Idaho Secretary of State was: | on the records of |   |              |
| The registered agent on record is:   |                   |   |              |
| Registered Agent   |                   | NORTHWEST REGISTERED AGENT LLC                      |              |
|  |                   | Commercial Registered Agent                         |              |
|  |                   | Physical Address                                    |              |
|  |                   | 784 S CLEARWATER LOOP STE B<br>POST FALLS, ID 83854 |              |
|  |                   | Mailing Address                                     |              |
|  |                   | 784 S CLEARWATER LOOP STE B                         |              |
|  |                   | POST FALLS, ID 83854                                | SIEB         |
| Agent or Address Change  |                   |   |              |
| Select if you are appointing a new agent.  |                   |   |              |
|  |                   |   |              |
| Limited Liability Company Managers and Members   | <b>i</b>          |   |              |
| Name   | Title             | Busir   | ness Address |
| Michael Mortensen  | Member            | 1627 W 5500 S                                       |              |
|  |                   | REXBURG, ID 83440                                   |              |
| Taralyn Mortensen  | Member            | 1627 W 5500 S                                       |              |
|  |                   | REXBURG, ID 83440                                   |              |
|  |                   |   |              |
| The annual report must be signed by an authorized signer of the entity.                |                   |   |              |
| Job Title: Manager   |                   |   |              |
|  |                   |   |              |
| Mike Mortensen   |                   |   | 02/11/2025   |
| Sign Here  |                   |   | Date         |
| 0.9.11.00  |                   |   |              |