

No. W 35030		Due no later than Dec 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form		ALAN CAVENER 2202 ESTATES DR. NAMPA ID 83686			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		CAVENER FARMS L.L.C. ALAN CAVENER 2202 ESTATES DR NAMPA ID 83686					
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	ALAN CAVENER	1048 W STATE	MERIDIAN	ID		83642	
MEMBER	JOLYNNE M CAVENER	2202 ESTATES DR.	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 35030		Signature: Alan Cavener			Date: 10/13/2015		
		Name (type or print): Alan Cavener			Title: Manager		
Processed 10/13/2015		* Electronically provided signatures are accepted as original signatures.					