No. W 84285		Due no later than May 31, 2014		2. Registere	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. BLACK CAT DAIRY, LLC ROCKLEN W MOUW 5655 S BLACK CAT RD MERIDIAN ID 83642		4000 PPV	ADRIAN R KROES 4890 DRY LAKE RD NAMPA ID 83686 3. New Registered Agent Signature:*			
				NAMPA				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	anies: Enter Nar	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MIKE SIEGERSMA		RSMA	4890 DRY LAKE RD	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report	t must be signed.*					
ID		Signature: Rocklen Mouw		Dat	Date: 04/02/2014			
W 84285		Name (type or print): Rocklen Mouw		Tit	Title: Managing Member			
Processed 04/02/2014 * Electronically provided signatures are accepted as original signatures.								