

No. W 74614	Reinstatement Annual Report Form ADMIN DISSOLVED 08/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) CLAYTON FOUST 5305 FREEMONT RD NEW PLYMOUTH ID 83655																						
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CIRCLE A CATTLE LLC CLAYTON FOUST 5305 FREEMONT RD NEW PLYMOUTH ID 83655		3. <u>New</u> Registered Agent Signature.																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Member President</td> <td>Marty Jamison</td> <td>3850 SW 4th</td> <td>New Plymouth</td> <td>ID</td> <td>Payette</td> <td>83655</td> </tr> <tr> <td>V-Pres</td> <td>Herb Clayton Foust</td> <td>5305 Freemont Rd</td> <td>New Plymouth</td> <td>ID</td> <td>Payette</td> <td>83655</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Member President	Marty Jamison	3850 SW 4th	New Plymouth	ID	Payette	83655	V-Pres	Herb Clayton Foust	5305 Freemont Rd	New Plymouth	ID	Payette	83655
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5. Organized Under the Laws of: IDAHO W 74614		6. Signature: <u>Clayton Foust</u> Name (type or print): <u>Clayton Foust</u>			Date: <u>9/1/10</u> member Title: <u>V-pres</u>																				
Issued 08/17/2010 by KAH																									