| No. <b>W 17869</b> Return to:  |                 | Due no later than Jan 31, 2015  Annual Report Form  |                                 | Registered Agent and Address (NO PO BOX)     LAYNE SIMMONS |  |       |         |             |
|--|-----------------|---|---------------------------------|--|--|-------|---------|-------------|
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |                 | 1. Mailing Address: Correct in this box if needed.  WILLOWVIEW FARM, LLC LAYNE SIMMONS 25850 KINGSBURY MIDDLETON ID 83644 |                                 |  | 25850 KINGSBURY MIDDLETON 83644  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                 | USA   |                                 |  |  |       |         |             |
| 4. Limited Liability Compa   | nies: Enter Nai | mes and Addresses of  | at least one Member or Manager. |  |  |       |         |             |
| Office Held  | Name            |   | Street or PO Address            |  | City   | State | Country | Postal Code |
| MEMBER LAYNE SIMMONS   |                 | 10NS  | 25850 KINGSBURY                 |  | MIDDLETON  | ID    |         | 83644       |
| 5. Organized Under the Laws of:  |                 | 6. Annual Report must be signed.*   |                                 |  |  |       |         |             |
| ID<br>W 17869  |                 | Signature: Layne Simmons  |                                 |  | Date: 11/14/2014   |       |         |             |
|  |                 | Name (type or print): Layne Simmons   |                                 |  | Title: Member  |       |         |             |
| Processed 11/14/2014 * Electronically provided signatures are accepted as original signatures. |                 |   |                                 |  |  |       |         |             |