

No. <b>W 642</b>		<b>Due no later than Nov 30, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ARBOR FARMS LIMITED LIABILITY COMPANY GEOFFREY SMITH 17926 HWY 20 BELLEVUE ID 83313		JEFF SMITH 17926 HWY 20 BELLEVUE ID 83313			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
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	
MEMBER	GEOFFREY SMITH	17926 HWY 20	BELLEVUE	ID	USA	83313	
5. Organized Under the Laws of:  <b>ID</b> <b>W 642</b>		6. Annual Report must be signed.*  Signature: Geoffrey Smith Name (type or print): Geoffrey Smith  Date: 10/25/2012 Title: Member					
Processed 10/25/2012      * Electronically provided signatures are accepted as original signatures.							