No. W 110255		Due no later than Jan 31, 2018	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		DOUGLAS F WOLF 2885 TRESTLE CREEK RD HOPE ID 83836-9629			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LOST RIVE DOUGLAS	1. Mailing Address: Correct in this box if needed. LOST RIVER FARMS, LIMITED LIABILITY COMPANY DOUGLAS F. WOLF 2885 TRESTLE CREEK RD HOPE ID 83836-9629 USA					
	HOPE ID			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: En	er Names and Addre	sses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER DOUGL	AS F WOLF	2885 TRESTLE CREEK RD	HOPE	ID	USA	83836-9629	
MEMBER LAUNA	K WOLF	2885 TRESTLE CREEK RD	HOPE	ID	USA	83836-9629	
5. Organized Under the Laws of: 6. Annua		port must be signed.*					
ID	Signature:	Signature: Douglas Date: 01/15/2018					
W 110255	Name (typ	Name (type or print): Douglas		Title: member			
Processed 01/15/2018	* Electronicall	* Electronically provided signatures are accepted as original signatures.					