

No. W 7457	Due no later than Dec 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) BARBARA B HOGAN 6814 RANDOLPH DR BOISE ID 83709				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HOGAN FARMS, LLC. 6814 RANDOLPH DR BOISE ID 83709		3. <u>New</u> Registered Agent Signature.				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager or Member Name Street or PO Address City State Country Postal Code							
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> BARBARA HOGAN 6814 W. RANDOLPH DR. BOISE, ID. ADA 83709							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 7457 </div>		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"> Signature: <u>Barbara Hogan</u> </td> <td style="width: 50%;"> Date: <u>12-9-2017</u> </td> </tr> <tr> <td> Name (type or print): <u>BARBARA HOGAN</u> </td> <td> Title: <u>MGR.</u> </td> </tr> </table>		Signature: <u>Barbara Hogan</u>	Date: <u>12-9-2017</u>	Name (type or print): <u>BARBARA HOGAN</u>	Title: <u>MGR.</u>
Signature: <u>Barbara Hogan</u>	Date: <u>12-9-2017</u>						
Name (type or print): <u>BARBARA HOGAN</u>	Title: <u>MGR.</u>						
Issued 11/13/2017 by TLB		101176					