

No. W 108901		Due no later than Dec 31, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. TRIANGLE A FARMS, LLC MELISSA KLUCKEN 106 E 420 N SHOSHONE ID 83352		MELISSA KLUCKEN 106 E 420 N SHOSHONE ID 83352			
				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	
MANAGER	SUSAN M MATLOCK	87 EAST 420 NORTH	SHOSHONE	ID	USA	83352	
5. Organized Under the Laws of: ID W 108901		6. Annual Report must be signed.* Signature: Susan Matock Name (type or print): Susan Matock Date: 01/30/2017 Title: Manager					
Processed 01/30/2017		* Electronically provided signatures are accepted as original signatures.					