

|  |                      |  |  |  |             |         |                      |
|--|----------------------|--|--|--|-------------|---------|----------------------|
| No. <b>W 47062</b>   |                      | <b>Due no later than Feb 28, 2017</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )         |             |         |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                      | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>MVB FARMS, LLC<br>BRAD BUTTARS<br>1404 NORTH 1070 EAST<br>SHELLEY ID 83274      |  | BRAD BUTTARS<br>1404 NORTH 1070 EAST<br>IDAHO FALLS ID 83274 |             |         |                      |
| <b>NO FILING FEE IF<br/>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<br>MANAGER   | Name<br>BRAD BUTTARS | Street or PO Address<br>1404 NORTH 1070 EAST   |  | City<br>SHELLEY  | State<br>ID | Country | Postal Code<br>83274 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 47062</b>                                 |                      | 6. Annual Report must be signed.*<br><br>Signature: Brad Buttars<br>Name (type or print): Brad Buttars<br><br>Date: 01/11/2017<br>Title: Manager |  |  |             |         |                      |
| Processed 01/11/2017 * Electronically provided signatures are accepted as original signatures.     |                      |  |  |  |             |         |                      |