No. W 914	Due no later than Feb 29, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. B & B APIARIES, L.L.C. BENJAMIN W LEMMONS 1644E. 4200N. BUHL ID 83316		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to:			10 100 N P 10 10 10 10 10 10 10 10 10 10 10 10 10	BENJAMIN W LEMMONS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			BUHL ID 8331	1644 E. 4200 N. BUHL ID 83316 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter N	ames and Addresses of	at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER BENJAMIN	.G. LEMMONS W LEMMONS LEMMONS	124 BADGER HILL TRAIL 1644 E. 4200 N. 124 BADGER HILL TRAIL	WILLOW CREEK BUHL WILLOW CREEK	MT ID MT	USA USA USA	59760 83316 59760	
5. Organized Under the Laws of:	er the Laws of: 6. Annual Report must be signed.*						
ID W 914	Signature: B. W. Lemmons Name (type or print): B. W. Lemmons			Date: 12/29/2015 Title: Owner			
Processed 12/29/2015	* Electronically provided signatures are accepted as original signatures.						