No. **W 120083**	**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.** ROTH FAMILY MILK 5, LLC. ROTH FAMILY LLC 539 S 800 E JEROME ID 83338	EVAN T ROTH 161 5TH AVE S STE 100 TWIN FALLS ID 83303 3. New 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
MEMBER	JM ROTH	539 S 800 E	JEROME	ID	USA	83338

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 120083**	Signature: JM ROTH Name (type or print): JM ROTH	Date: 12/27/2016 Title: OWNER
Processed 12/27/2016	* Electronically provided signatures are accepted as original signatures.	