

No. W 137266	Due no later than Apr 30, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) DARIN ANDERSON 916 1ST AVE DEARY ID 83823
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. FAMILY ANDERSON FARMS, LLC PO BOX 156 DEARY ID 83823		3. <u>New</u> Registered Agent Signature.
NO FILING FEE IF RECEIVED BY DUE DATE			
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"/>	DARIN ANDERSON	916 1ST AVE DEARY ID	LATAH 83823
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	SHARON ANDERSON	605 INDIAN HILLS DR	MOSCOW ID LATAH 83841
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	TAMI	510 SOUTH TAFT	KENNEWICK WA 99336
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	PAULA KNAPSTAD	440 N VOLLAND ST	KENNEWICK WA 99337
5. Organized Under the Laws of: <div style="text-align: center; margin-top: 10px;"> IDAHO W 137266 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature: <u>Darin E Anderson</u> Name (type or print): <u>DARIN E ANDERSON</u> </div> <div> Date: <u>4-14-16</u> Title: <u>MANAGER</u> </div> </div>	
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