No. W 85125	Due no later than Jul 31, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. VAN BEEK NUTRITION, LLC. LAURA D SCHMITT 614 PIERCE ST SIOUX CITY IA 51101		2. Registered Agent and Office (NOT A P.O. BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080					
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Re	gistered Ager	nt Signature.
4. Limited Liability Manager or Member	Companies: Enter Names and Addresses of Name Street or PO Address	f Managers City		bers. See Ir	nstructions. Postal Code
Manager 🗷 Member 🗌	Ronald Van Beek 3689 460th Street	Orange C	ity IA	USA	51041
Manager 🗷 Member 🗌	Janet Van Beek 3689 460th Street	Orange C	ity IA	USA	51041
Manager 🗷 Member 🗌	Kevin Hoogendoorn 3689 460th Street	Orange C	ity IA	USA	51041
Manager Member					
5. Organized Under the Lav IOWA W 85125	Nos of: 6. VAN BEEK NUTRITION, LLC Signature: By: Name (type or print): Ronald Van Beek	1	/	Date: 5 Title:	/24- /13 Manager
ssued 05/23/2013 by PEH					12061

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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