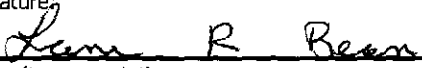
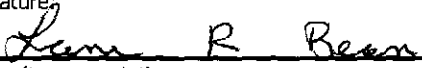
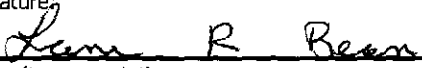


No. W 153819	Due no later than Jul 31, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) LANE R BEAN 2635 E HWY 33 TETON ID 83451
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. LAZY B FARMS, LLC LANE R BEAN 2635 E HWY 33 TETON ID 83451		3. <u>New</u> Registered Agent Signature.

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 checked="" type="checkbox"/>	Lane R Bean	2635 E Hwy 33	Teton	ID	USA	83451
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	LaRue Lambert	4096 N 4300W	Mackay	ID	USA	83251
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Leisa Clark	4332 Eaken Ave SE	Delano	MN	USA	55328
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 153819 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>5/31/16</u> </td> </tr> <tr> <td> Name (type or print): <u>Lane R Bean</u> </td> <td> Title: <u>manager</u> </td> </tr> </table>	Signature: 	Date: <u>5/31/16</u>	Name (type or print): <u>Lane R Bean</u>	Title: <u>manager</u>
Signature: 	Date: <u>5/31/16</u>				
Name (type or print): <u>Lane R Bean</u>	Title: <u>manager</u>				

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INSTRUCTIONS FOR THE FRANCHISE ANNUAL REPORT FORM