No. W +016	Annual Report Form Due No Later Than November 30.	ې ې 2. Registered Aç	ent and Office N		
Return to: SECRETARY OF STATE	1. Mailing Address - Please Correct, If Not Correct		TRAVIS L BOWEN P.C. ***********************************		
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	S & B DAIRY MANAGEMENT, L.C STEVEN R WHITESIDES 719 E 700 N	• 1906 Jer	1906 Jennie Lee Dr. IDAHO FALLS ID .3340		
NO FEE REQUIRED		3. Organized Ur			
** FINAL NOTICE **	RUPERT ID 8335J	ID	W	4016	
Corporations: Enter Names and E Limited Liability Companies: Ente	Business Addresses of President, Secretary and Director Names and Addresses of Managers or Mem	rs bers (check one)		,	
Office held Name	Street or P.O. Address	<u>City</u>	State	Zip	
Co-Operating Brent Whitesides Manager	600 North 662 East	Rupert	Idaho	83350	
Co-Operating Steven R. Whitesi	des 719 East 700 North	Rupert	Idaho	83350	
Sanager lange in Travis L. Bowen, I	P.C. 1906 Jennie Lee Drive	Idaho Falls	Idaho	83404	
egistered Agent ddress:				*	
SIGNATURE OF CURR	ENT RA 6.	f 1	M	10 10 1	
	Signature Brent Whitesides Name (Typed or Printed)	Date	Co-Operatin	ng Manager	
ISSUED: 10-04-19	OP7 C DO NOT TAPE OR STAPLE	.)	374		