No. W 129399 Return to:	Due no later than Sep 30, 2017 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) RITA K GILLESPIE
SECRETARY OF STATE 1. M 450 N 4th STREET R. I	ailing Address: Correct in this box if needed. D. FARM, LLC A K GILLESME HALL 30 BB3 129 SHOOFLY CUTOFF RD HOT SPRINGS UNEAU ID 83604 ROAD	29029 SHOOFLY CUTOFF RD BRUNEAU ID 83604
NO FILING FEE IF RECEIVED BY DUE DATE		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 Member Rita K. Hall 30883 Hot Springs Road Bruneau. To. 83604 Manager Member Dave Owen 710 River Virw Circle Manager Member Pine. To. 83647 Manager Member		
5. Organized Under the Laws of: IDAHO W 129399	6. Signature: That Name (type or print): The HALL	Date: 9/28/17 Title: CO-OWNER MANAGEN
Issued 09/25/2017 by SAT		108354

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM