No. <b>W 154390</b>		Due no later than Jul 31, 2016		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.		GABRIEL FIORAVANTI 664 MEADOW CREEK RD				
		AVANTI AG FARMS LLC AVANTI AG FARMS PO BOX 3104 BONNERS FERRY ID 83805  BONNERS FERRY ID 83805  BONNERS FERRY ID 83805  3. New Registered Agent Signature:*						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	oanies: Enter Na	mes and Addresses	of at least one Member or Manage	er.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER LYNDA FIORAVANTI		AVANTI	P.O. BOX 3104		BONNERS FERRY	ID	USA	83805
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Lynda Fioravanti		Date: 07/15/2016				
W 154390		Name (type or print): Lynda Fioravanti			Title: Member			
Processed 07/15/2016 * Electronically provided signatures are accepted as original signatures.								