No. W 55278		Due no later than Oct 31, 2009		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		KRISTINE S	KRISTINE SOMSEN 641 NORTH 1250 EAST			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. SOMSEN FARMS, LLC KRISTINE SOMSEN 641 NORTH 1250 EAST JACKSON ID 83350 USA						
				JACKSON IL	JACKSON ID 83350			
				3. <u>New</u> Registe	3. New Registered Agent Signature:*			
4. Limited Liability Co	mpanies: Enter Na	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	KRISTINE SOMSEN GARY FOWLER		641 NORTH 1250 EAST 641 NORTH 1250 EAST	JACKSON JACKSON	ID ID	USA USA	83350 83350	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 55278		Signature: kr		Date: 10/06/2009				
		Name (type o		Title: Member				
Processed 10/06/200	9	* Electronically p	provided signatures are accepted as origina	l signatures.				