

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000004955

Entity Name: ARTISAN FARMS, LLC

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

875 E. WISCONSIN AVENUE, SUITE 800  
MILWAUKEE, WI 53202

**New Principal Place of Business:**

**Current Mailing Address:**

875 E. WISCONSIN AVENUE, SUITE 800  
MILWAUKEE, WI 53202

**New Mailing Address:**

FEI Number: 20-5259121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ZIEGLER, ANDREW  
Address: 875 E. WISCONSIN AVENUE, SUITE 800  
City-St-Zip: MILWAUKEE, WI 53202

Title: MGRM  
Name: ZIEGLER, CARLENE  
Address: 875 E. WISCONSIN AVENUE, SUITE 800  
City-St-Zip: MILWAUKEE, WI 53202

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANDREW A. ZIEGLER

MGRM

04/10/2012

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date