No. W 17566 Return to:		Due no later than Dec 31, 2011 Annual Report Form		2	2. Registered Agent and Address (NO PO BOX) MICHAEL B IHLI			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HFM CASTLE VIEW, LLC MIKE IHLI 625 S. SCHOOL AVE. KUNA ID 83634			643 S. SCHOOL AVE. KUNA ID 83634 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	MICHAEL B	IHLI	625 S. SCHOOL AVE.		KUNA	ID	USA	83634
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 17566		Signature: Michael B. Ihli			Date: 11/17/2011			
		Name (type or print): Michael B. Ihli			Title: Manager			
Processed 11/17/2011	* Electronically provided signatures are accepted as original signatures.							