| No. W 145705 | | Due no later than Dec 31, 2016 | | 2. Registered | 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. HIT, LLC SHAWN FERNANDEZ PO BOX 585 STAR ID 83669 | | 24585 CAN STE 102 STAR ID | BRIAN WEBB 24585 CAN ADA RD STE 102 STAR ID 83669 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compa | nies: Enter Nai | mes and Addresses | of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER SHAWN FERNAL | | NANDEZ | 24585 CAN ADA RD | STAR | ID | USA | 83669 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Kelly Duren | | Date: 01/27 | Date: 01/27/2017 | | | |
| W 145705 | | Name (type or print): Kelly Duren | | Title: Direc | Title: Director of Operations | | | |
| Processed 01/27/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |