

|                                                                                                                                                        |                |                                                                                                                                                    |       |                                                       |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------|---------|------------------|--|
| No. <b>W 106199</b>                                                                                                                                    |                | <b>Due no later than Aug 31, 2014</b>                                                                                                              |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>    |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>HBM MARKETING LLC<br>HEATHER BURTON<br>10707 W COLTON LN<br>EAGLE ID 83616<br>USA |       | HEATHER BURTON<br>10707 W COLTON LN<br>EAGLE ID 83616 |         |                  |  |
|                                                                                                                                                        |                |                                                                                                                                                    |       | 3. <u>New</u> Registered Agent Signature:*            |         |                  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                |                                                                                                                                                    |       |                                                       |         |                  |  |
| Office Held                                                                                                                                            | Name           | Street or PO Address                                                                                                                               | City  | State                                                 | Country | Postal Code      |  |
| MEMBER                                                                                                                                                 | HEATHER BURTON | 10707 W COLTON LN.                                                                                                                                 | EAGLE | ID                                                    | USA     | 83616            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                | 6. Annual Report must be signed.*                                                                                                                  |       |                                                       |         |                  |  |
| <b>ID<br/>W 106199</b>                                                                                                                                 |                | Signature: Heather Burton                                                                                                                          |       |                                                       |         | Date: 07/28/2014 |  |
|                                                                                                                                                        |                | Name (type or print): Heather Burton                                                                                                               |       |                                                       |         | Title: Owner     |  |
| Processed 07/28/2014                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                          |       |                                                       |         |                  |  |