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| No. W 41824 | | Due no later than Aug 31, 2017 | | Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: 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. HBW WARRANTY ADMINISTRATION LLC C/O LEGAL 13900 E HARVARD AVE AURORA CO 80014 | | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 | | 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 | |
| MANAGER | SCOTT J CROMIE | 13900 E. HARVARD AVE. | AURORA | CO | | 80014 | |
| 5. Organized Under the Laws of: DE W 41824 | | 6. Annual Report must be signed.* Signature: SCOTT J. CROMIE Name (type or print): SCOTT J. CROMIE | | Date: 06/28/2017 Title: MANAGER | | | |
| Processed 06/28/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | | |