No. W 174651		Due no later than Nov 30, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. HC CABIN LLC PO BOX 804 HAILEY ID 83333		2	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					RICK MAXWELL 1531 COLIBRI LANE HAILEY ID 83333 3. New Registered Agent Signature:*			
4. Limited Liability Compa		 mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER RICK MAXWELL		ELL	PO BOX 804		HAILEY	ID	USA	83333
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Rick Maxwell			Date: 09/29/2017			
W 174651		Name (type or print): Rick Maxwell			Title: MANAGER			
Processed 09/29/2017 * Electronically provided signatures are accepted as original signatures.								