No. W 68320		Due no later than Nov 30, 2012		2. Registered A	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. HHS LLC GALE W HARDING 329 WEST 7TH SOUTH REXBURG ID 83440		329 WEST 7 REXBURG ID	GALE W HARDING 329 WEST 7TH SOUTH REXBURG ID 83440 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
200		nes and Addresses o	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER GALE W HA		RDING	329 WEST 7TH SOUTH	REXBURG	ID	USA	83440	
MANAGER	JAGER D CRAIG HE		240 EAST MAIN ST	REXBURG	ID	USA	83440	
MANAGER	SYLVAN F S	EELY	1175 SOUTH 5TH WEST	REXBURG	ID	USA	83440	
5. Organized Under the Laws of:		6. Annual Report m						
ID W 68320		Signature: Gale W. Harding			Date: 09/14/2012			
		Name (type or pr		Title: Manager				
Processed 09/14/2012		* Electronically prov	ided signatures are accepted as original	signatures.				