| No. C 44063 Return to: | | Due no later than Jul 31, 2015 Annual Report Form | | | 2. Registered Agent and Address (NO PO BOX) ANNETTE WELLS | | | |
|-------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------|-----------------------------------------------------------|---------|-------------|--|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. HILDE KELLOGG, INC. ANNETTE A WELLS P. O. BOX 430 ATHOL ID 83801 USA | | 428 CIDER ROAD ATHOL ID 83801 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| PRESIDENT | ANNETTE A | WELLS | P. O. BOX 430 | ATHOL | ID | USA | 83801-1479 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Annette A | | Date: 07/23/2015 | | | | |
| C 44063 | | Name (type or print) | Title: President | | | | | |
| Processed 07/23/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |