No. W 132858 Return to:		Due no later than Jan 31, 2015 Annual Report Form			2. Registered Agent and Address (NO PO BOX) KARL JOHNSON				
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. WILLOW HEMISPHERE LLC ANTHONY MIDSON HEMISPHERE LLC 2520 SE CLAY PORTLAND OR 97214 USA		MOSC	115 S WASHINGTON ST STE 2 MOSCOW 83843				
				3. <u>New</u> F	3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Compar	nies: Enter Na	mes and Address	es of at least one Member or Manager.						
Office Held	Name		Street or PO Address	City		State	Country	Postal Code	
MEMBER	ANTHONY J	MIDSON	2520 SE CLAY	PORTLA	AND	OR	USA	97214	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
OR W 132858		Signature: Anthony Midson			Date: 02/23/2015				
		Name (type or print): Anthony Midson			Title: Member				
Processed 02/23/2015 * Electronically provided signatures are accepted as original signatures.									