

| | | | | | | | |
|--|-----------------|--|--------|--|------------------|-------------|--|
| No. W 63966 | | Due no later than Jun 30, 2018 | | 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 | | Annual Report Form | | AARON LERWILL 3305 E 1200 N ASHTON ID 83420 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | HAT CREEK ENTERPRISE LLC AARON LERWILL PO BOX 117 ASHTON ID 83420 | | | | | |
| 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 | |
| MEMBER | AARON LERWILL | PO BOX 117 | ASHTON | ID | | 83420 | |
| MEMBER | JANELLE LERWILL | P.O. BOX 117 3305 E. 1200 N. | ASHTON | ID | USA | 83420 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 63966 | | Signature: AARON LERWILL | | | Date: 04/24/2018 | | |
| | | Name (type or print): AARON LERWILL | | | Title: MEMBER | | |
| Processed 04/24/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | |