No. <b>W 55196</b> Return to:		Due no later than Oct 31, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  BLACKS CREEK LLC JOHN B DUKE PO BOX 710 STAR ID 83669 USA		2. Registered Agent and Address (NO PO BOX)  WM LYMAN BELNAP 12554 W BRIDGER ST STE 120 BOISE ID 83713  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Compa	anies: Enter Nan	nes and Addresses of at least one Member or	Manager.				
Office Held	Name	Street or PO Addre	SS	City	State	Country	Postal Code
MANAGER	GER JOHN B DUKE			STAR	ID	USA	83669
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: JOHN B DUKE	Date: 09/08/2015				
W 55196		Name (type or print): JOHN B DUKE	Title: MANAGER				
Processed 09/08/2015 * Electronically provided signatures are accepted as original signatures.							