

|                                                                                                                                                        |            |                                                                                                                                                 |          |                                                            |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------|---------|------------------|--|
| No. <b>C 52788</b>                                                                                                                                     |            | <b>Due no later than Jan 31, 2017</b>                                                                                                           |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>         |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |            | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>HILL FARMS, INC.<br>MARTI HILL<br>3625 EAST AMITY RD<br>MERIDIAN ID 83642-7015 |          | MARTI HILL<br>3625 E. AMITY ROAD<br>MERIDIAN ID 83642-7015 |         |                  |  |
|                                                                                                                                                        |            |                                                                                                                                                 |          | 3. <u>New</u> Registered Agent Signature:*                 |         |                  |  |
| 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                                                                                                                                              | MARTI HILL | 3625 E. AMITY RD.                                                                                                                               | MERIDIAN | ID                                                         | USA     | 83642-7015       |  |
| 5. Organized Under the Laws of:                                                                                                                        |            | 6. Annual Report must be signed.*                                                                                                               |          |                                                            |         |                  |  |
| <b>ID<br/>C 52788</b>                                                                                                                                  |            | Signature: Marti Hill                                                                                                                           |          |                                                            |         | Date: 11/20/2016 |  |
|                                                                                                                                                        |            | Name (type or print): Marti Hill                                                                                                                |          |                                                            |         | Title: Pres.     |  |
| Processed 11/20/2016                                                                                                                                   |            | * Electronically provided signatures are accepted as original signatures.                                                                       |          |                                                            |         |                  |  |