

|                                                                                                                                                        |                  |                                                                                                                                                                               |           |                                                              |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------|---------|-------------|--|
| No. <b>W 190040</b>                                                                                                                                    |                  | <b>Due no later than Oct 31, 2018</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>HAMMONS LLC<br>MARLA R HAMMONS<br>1294 CIMARRON COURT<br>MIDDLETON ID 83644 |           | MARLA R HAMMONS<br>1294 CIMARRON COURT<br>MIDDLETON ID 83644 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                                               |           | 3. <u>New</u> Registered Agent Signature:*                   |         |             |  |
| 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                                                                                                                                                 | THOMAS A HAMMONS | 1294 CIMARRON COURT                                                                                                                                                           | MIDDLETON | ID                                                           | USA     | 83644       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 190040</b>                                                                                          |                  | 6. Annual Report must be signed.*<br>Signature: Marla Hammons<br>Name (type or print): Marla Hammons<br>Date: 08/23/2018<br>Title: registered agent                           |           |                                                              |         |             |  |
| Processed 08/23/2018                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                     |           |                                                              |         |             |  |