No. **W 75725**	**Due no later than Jun 30, 2013** **Annual Report Form**	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**	**1. Mailing Address: Correct in this box if needed.** HAMILTON TRIPLE C FARM, LLC CLARK G HAMILTON 17122 E RIRIE HWY RIRIE ID 83343	CLARK GRANT HAMILTON 17122 E RIRIE HWY RIRIE ID 83343 3. New 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
MANAGER	CLARK GRANT HAMILTON	17122 E RIRIE HWY	RIRIE	ID	USA	83343
MANAGER	KRISTI B HAMILTON	17122 E RIRIE HWY	RIRIE	ID	USA	83443

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 75725**	Signature: Kristi B Hamilton	Date: 07/17/2013
	Name (type or print): Kristi B Hamilton	Title: Partner/owner

Processed 07/17/2013

* Electronically provided signatures are accepted as original signatures.