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| No. W 104355 | Due no later than Jun 30, 2014 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. | | TINA DELPH 820 LARCH ST POTLATCH ID 83855 | | | |
| | HATTER CREEK SALVAGE AND SUPPLY LLC TINA M DELPH PO BOX 455 POTLATCH ID 83855 USA | | 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 |
| MANAGER | TINA M DELPH | P.O. BOX 455 | POTLATCH | ID | USA | 83855 |
| 5. Organized Under the Laws of: ID W 104355 | | 6. Annual Report must be signed.* Signature: Tina M Delph Name (type or print): Tina M Delph | | Date: 05/14/2014 Title: Owner | | |
| Processed 05/14/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | |