No. W 114293		Due no later than May 31, 2014	2. Registered A	Registered Agent and Address (NO PO BOX) ANN KOSSLER 445 BOHANNON CREEK RD AND NO 20167			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed.	445 BOHANI				
		YOUR HIRED HAND, LLC ANN KOSSLER 445 BOHANNON CREEK RD		SALMON ID 83467 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		SALMON ID 83467 USA	3. <u>New</u> Registe	ered Agent Si	gnature:**		
4. Limited Liability Comp	oanies: Enter Nar	nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER ANN KOSSLI		er 445 Bohannon CR RD	SALMON	ID	USA	83467	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Ann Kossler	Date: 04/01/2014				
W 114293		Name (type or print): Ann Kossler	Title: Member				
Processed 04/01/2014 * Electronically provided signatures are accepted as original signatures.							