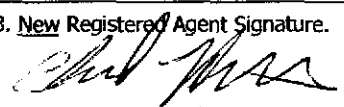
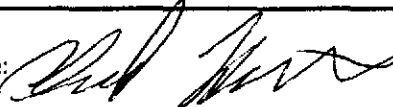
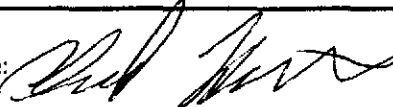
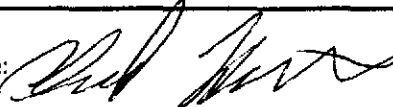


No. W 81629	Reinstatement Annual Report Form ADMIN DISSOLVED 05/14/2014		2. Registered Agent and Office (NOT A P.O. BOX) CHAD HAMILTON 11533 W GUNSMOKE ST BOISE ID 83713
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. HAMILTON HOLDINGS, LLC CHAD HAMILTON 11533 W GUNSMOKE ST BOISE ID 83713		3. <u>New Registered Agent Signature.</u> 
REINSTATEMENT FEE DUE: \$30.00			

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Chad Hamilton	11533 W Gunsmoke St	Boise	ID		83713
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 81629 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>3/25/18</u> </td> </tr> <tr> <td> Name (type or print): <u>Chad Hamilton</u> </td> <td> Title: <u>member</u> </td> </tr> </table>	Signature: 	Date: <u>3/25/18</u>	Name (type or print): <u>Chad Hamilton</u>	Title: <u>member</u>
Signature: 	Date: <u>3/25/18</u>				
Name (type or print): <u>Chad Hamilton</u>	Title: <u>member</u>				

Issued 03/25/2018 by online

FOR THE IDAHO ANNUAL REPORT FORM