

No. W 126832	Due no later than Jul 31, 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.		AARON HUNSAKER 100 MOUNTAIN VIEW DRIVE MCCAMMON ID 83250			
	HARKNESS HOTEL, LLC (THE) AARON HUNSAKER 206 CENTER ST MCCAMMON ID 83250		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	AARON PETER HUNSAKER	100 MOUNTAIN VIEW DRIVE	MCCAMMON	ID	USA	83250
5. Organized Under the Laws of: ID W 126832		6. Annual Report must be signed.* Signature: Aaron Hunsaker Name (type or print): Aaron Hunsaker		Date: 07/22/2014 Title: Owner		
Processed 07/22/2014		* Electronically provided signatures are accepted as original signatures.				