| No. W 84955 | | Due no later than Jun 30, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------------------|--|------------------|---|------------|---------------------|--|
| Return to: | | Annual Report Form | | MARIE KELLOM 489 S CLARK DUBOIS ID 83423 3. New Registered Agent Signature:* | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | HARTWELI MARIE KE | 1. Mailing Address: Correct in this box if needed. HARTWELL FAMILY, LLC MARIE KELLOM P.O. BOX 167 DUBOIS ID 83423 USA | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: Er | ter Names and Addre | esses of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| | E KELLOM T KELLOM | P O BOX 167 P.O. BOX 252 | DUBOIS HOBSON | ID MT | USA USA | 83423 59452-0252 | |
| 5. Organized Under the Laws of: | 6. Annual Re | 6. Annual Report must be signed.* | | | | | |
| ID | Signature | Signature: Marie Kellom Date: 04/20/2015 | | | | | |
| W 84955 | Name (typ | Name (type or print): Marie Kellom Title: Member | | | | | |
| Processed 04/20/2015 | * Electronical | * Electronically provided signatures are accepted as original signatures. | | | | | |