

No. <b>W 113620</b>	<b>Due no later than May 31, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		JOSHUA HAWKES 947 CASSIA ST IDAHO FALLS ID 83402			
	HAWKES HEALTH MARKETING LLC JOSH HAWKES 947 CASSIA ST IDAHO FALLS ID 83402		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	JARED HAWKES	1848 12TH STREET	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of:  <b>ID</b> <b>W 113620</b>		6. Annual Report must be signed.* Signature: Josh Hawkes Name (type or print): Josh Hawkes		Date: 06/29/2017 Title: Owner		
Processed 06/29/2017		* Electronically provided signatures are accepted as original signatures.				