No. W 56300		Due n	2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form		C TIMOTHY HOPKINS ESQ 428 PARK AVE IDAHO FALLS ID 83402 3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.						
		HOTEL CREEK PROPERTIES, LLC C TIMOTHY HOPKINS ESQ 428 PARK AVE IDAHO FALLS ID 83402						
NO FILING FEE IF		USA						
RECEIVED BY DUE DATE								
4. Limited Liability Companie	es: Enter Nar	nes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER DAVID COW			17400 NE STONEY MEADOWS DR	VANCOUVER	WA		98682	
MANAGER STEVEN HAY			17400 NE STONEY MEADOWS DR	VANCOUVER	WA		98682	
MANAGER KEN BLANKS		TEIN	17400 NE STONEY MEADOWS DR	VANCOUVER	WA		98682	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: C. Timothy Hopkins		Date: 09/21/2015				
W 56300		Name (type or print): C. Timothy Hopkins		Title: Registered Agent				
Processed 09/21/2015	* Electronically provided signatures are accepted as original signatures.							