No. W 62821		Due no later than May 31, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			THOMAS D MORT 1411 GILBERT AVE COEUR D'ALENE ID 83815			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.						
		HAT TRICK INVESTMENTS, LLC SHAWNA M MORT PO BOX 909 POST FALLS ID 83877-0909						
				3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held Name	ie		Street or PO Address		City	State	Country	Postal Code
MEMBER THO	MAS D	MORT	PO BOX 909		POST FALLS	ID		83877-0909
MEMBER SHAV	WNA M	MORT	PO BOX 909		POST FALLS	ID		83877-0909
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 62821		Signature: SHAWNA M. MORT Date				Date:	e: 06/07/2016	
		Name (type or print): SHAWNA M. MORT			Title: MEMBER			
Processed 06/07/2016	* Electronically provided signatures are accepted as original signatures.							