No. W 117076		Annual Report Form 1. Mailing Address: Correct in this box if needed. SAB BOOKS, LLC PHILIP A WELLS 905 ORCHARD AVE MOSCOW ID 83843		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				ALL DAY \$49 IDAHO REGISTERED A 1900 NORTHWEST BLVD STE 106A COEUR D ALENE ID 83814-8384 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		USA nes and Addresses of at lo	east one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	PHILIP WELLS		33 NASSAU AVE 2ND FLOOR, SUITE	05 Brooklyn	NY	USA	11222
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*					
ID W 117076		Signature: Philip Wells		Date: 09/28/2014			
		Name (type or print): Philip Wells		Title: Operations Manager			
Processed 09/28/2014 * Electronically provided signatures are accepted as original signatures.							