No. C 209870		Due no later than May 31, 2017 Annual Report Form 1. Mailing Address: Correct in this box if needed. TEAM RED, WHITE & BLUE, INC. LAKEN STUTZMAN 1110 W PLATT ST TAMPA FL 33606		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				905 E RIVE BOISE ID	MATTHEW HENMAN 905 E RIVERPARK LN BOISE ID 83706 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Corporations: Enter Names and Busine		ess Addresses of Pres	ident. Secretary, and Directors. Treas	surer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR LAKEN STUTZMAN		ΓΖΜΑΝ	1110 W PLATT ST	TAMPA	FL		33606	
5. Organized Under the Laws of: MI C 209870		6. Annual Report must be signed.* Signature: Laken Stutzman Name (type or print): Laken Stutzman			e: 03/20/2017 e: Director of			
Processed 03/20/2017 * Electronically provided signatures are accepted as original signatures.								