

No. W 140025	Due no later than Jul 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) DARIN DEANGELI 250 S 5TH ST STE 660 BOISE ID 83702				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. BLUE MOON PRODUCTIONS, LLC LINDA PAYNE SMITH 2960 E MIGRATORY DR BOISE ID 83706		3. <u>New</u> Registered Agent Signature.				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager or Member	Name	Street or PO Address	City State Country Postal Code				
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Jeffrey K Smith	2960 E. Migratory Dr	Boise Id Ada 83706				
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 140025 </div>		6. <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"> Signature: <u>Jeffrey K Smith</u> </td> <td style="width: 40%;"> Date: <u>5/25/17</u> </td> </tr> <tr> <td> Name (type or print): <u>Jeffrey K Smith</u> </td> <td> Title: <u>Member</u> </td> </tr> </table>		Signature: <u>Jeffrey K Smith</u>	Date: <u>5/25/17</u>	Name (type or print): <u>Jeffrey K Smith</u>	Title: <u>Member</u>
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