

|                                                                                                                                                        |               |                                                                                                                                                                                      |       |                                                            |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|---------|-------------|--|
| No. <b>W 140019</b>                                                                                                                                    |               | <b>Due no later than Jul 31, 2015</b>                                                                                                                                                |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>         |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>REDDISH GAMES L.L.C.<br>REDDISH GAMES<br>3539 S TWIN SPRINGS WAY<br>NAMPA ID 83686 |       | KOLBY REDDISH<br>3539 S TWIN SPRINGS WAY<br>NAMPA ID 83686 |         |             |  |
|                                                                                                                                                        |               |                                                                                                                                                                                      |       | 3. <u>New</u> Registered Agent Signature:*                 |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |               |                                                                                                                                                                                      |       |                                                            |         |             |  |
| Office Held                                                                                                                                            | Name          | Street or PO Address                                                                                                                                                                 | City  | State                                                      | Country | Postal Code |  |
| MANAGER                                                                                                                                                | KOLBY REDDISH | 3539 S TWIN SPRINGS WAY                                                                                                                                                              | NAMPA | ID                                                         | USA     | 83686       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 140019</b>                                                                                          |               | 6. Annual Report must be signed.*<br>Signature: Kolby Reddish<br>Name (type or print): Kolby Reddish<br>Date: 07/31/2015<br>Title: Owner                                             |       |                                                            |         |             |  |
| Processed 07/31/2015                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                                                            |       |                                                            |         |             |  |