

No. W 15084		Due no later than Apr 30, 2014		Annual Report Form		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. NEGATIVE VIEW, LLC (THE) S. JOSEPH SHARNETSKY 362 E JEFFREY PINE LN COEUR D ALENE ID 83815 USA		S JOSEPH SHARNETSKY 362 E JEFFREY PINE LN COEUR D'ALENE ID 83815		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	S JOSEPH SHARNETSKY	362 E JEFFREY PINE LANE	COEUR D'ALENE	ID	USA	83815	
5. Organized Under the Laws of: ID W 15084		6. Annual Report must be signed.* Signature: S Joseph Sharnetsky Name (type or print): S Joseph Sharnetsky		Date: 03/21/2014 Title: Manager			
Processed 03/21/2014		* Electronically provided signatures are accepted as original signatures.					