

|  |              |   |            |   |         |             |  |
|--|--------------|---|------------|---|---------|-------------|--|
| No. <b>W 80160</b>   |              | <b>Due no later than Dec 31, 2012</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>O'SHUCKS, LLC<br>RANDY T MUSSER<br>PO BOX 5262<br>TWIN FALLS ID 83303 |            | RANDY MUSSER<br>3272 FALLS AVE E<br>TWIN FALLS ID 83301 |         |             |  |
|  |              |   |            | 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  | RANDY MUSSER | 3272 FALLS AVE E  | TWIN FALLS | ID  | USA     | 83301       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 80160</b>   |              | 6. Annual Report must be signed.*<br>Signature: Randy T Musser<br>Name (type or print): Randy T Musser<br>Date: 11/29/2012<br>Title: Manager                            |            |   |         |             |  |
| Processed 11/29/2012   |              | * Electronically provided signatures are accepted as original signatures.   |            |   |         |             |  |