

No. W 43808	Due no later than Oct 31, 2013 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. FLOATIN, LLC STEVEN L. SOARES 4551 MAUREEN CIRCLE LIVERMORE CA 94550 USA		T.J. ANGSTMAN 3649 LAKEHARBOR LANE BOISE ID 83703			
			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	STEVEN SOARES	4551 MAUREEN CIRCLE	LIVERMORE	CA	USA	94550
MEMBER	STEVEN LEE SOARES	4551 MAUREEN CIRCLE	LIVERMORE	CA	USA	94550
5. Organized Under the Laws of: ID W 43808	6. Annual Report must be signed.* Signature: Steven L. Soares Name (type or print): Steven L. Soares		Date: 08/12/2013 Title: President			
Processed 08/12/2013		* Electronically provided signatures are accepted as original signatures.				