

No. W 115767		Due no later than Jul 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		1. Mailing Address: Correct in this box if needed. TRIPLE 8 LLC TARA LAVIER 2126 S BUCK PASS AVE BOISE ID 83709		TARA LAVIER 2126 S BUCK PASS AVE BOISE ID 83709			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name TARA LAVIER	Street or PO Address 2126 S BUCK PASS AVE		City BOISE	State ID	Country USA	Postal Code 83709
5. Organized Under the Laws of: ID W 115767		6. Annual Report must be signed.* Signature: Tara Lavier Name (type or print): Tara Lavier Date: 06/05/2013 Title: Manager					
Processed 06/05/2013 * Electronically provided signatures are accepted as original signatures.							