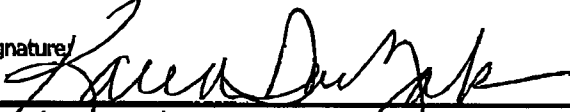
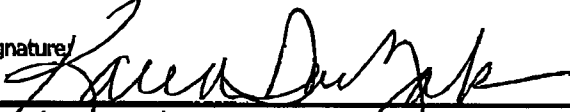
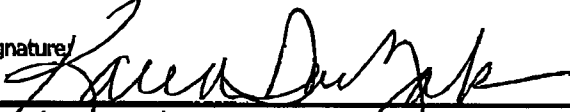


No. W 127262	Reinstatement Annual Report Form ADMIN DISSOLVED 10/15/2014		2. Registered Agent and Office (NOT A P.O. BOX) KAREN DAY ZAK 810 N 21ST BOISE ID 83702																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. GCG PRODUCTIONS LLC PO BOX 116 BOISE ID 83701		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Karen Day ZAK</td> <td>1119 N Eagle Rd</td> <td>Eagle Id</td> <td>Ada</td> <td></td> <td>83616</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Karen Day ZAK	1119 N Eagle Rd	Eagle Id	Ada		83616	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 127262		6. <table border="1"> <tr> <td>Signature: </td> <td>Date: <u>Dec 3, 2015</u></td> </tr> <tr> <td>Name (type or print): <u>Karen Day Zak</u></td> <td>Title: <u>Ex Director</u></td> </tr> </table>		Signature: 	Date: <u>Dec 3, 2015</u>	Name (type or print): <u>Karen Day Zak</u>	Title: <u>Ex Director</u>																															
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM