| No. W 107825 | | Due no later than Oct 31, 2016 | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|--|--|-------|---------|-------------|
| Return to: | | Annual Report Form | KARIN AIELLO | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. DAY THREE STUDIOS LLC KARIN AIELLO 2167 N CHARITAN DR BOISE ID 83713 | 2167 N CHARITAN DR BOISE ID 83713 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | USA | | | | |
| 200 | • | mes and Addresses of at least one Member or Manager. | 611 | G1 1 | | 5 |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code |
| MANAGER KARIN AIELLO | | LO 2167 N CHARITAN DR | BOISE | ID | USA | 83713 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | |
| ID | | Signature: Karin Aiello | Date: 10/29/2016 | | | |
| W 107825 | | Name (type or print): Karin Aiello | Title: Manager | | | |
| Processed 10/29/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | |