| No. <b>W 129133</b> Return to:   |           | Due no later than Sep 30, 2016  Annual Report Form   |                                      |  | 2. Registered Agent and Address (NO PO BOX) TRENT STEPHENS                     |       |         |             |  |
|--|-----------|--|--------------------------------------|--|--|-------|---------|-------------|--|
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |           | 1. Mailing Address: Correct in this box if needed. FROLIC PARTIES, LLC TRENT DEE STEPHENS 4441 N WILLIAMSBURG POCATELLO ID 83204 |                                      |  | 4441 N WILLIAMSBURG LN POCATELLO ID 83204  3. New Registered Agent Signature:* |       |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |           |  |                                      |  |  |       |         |             |  |
| 4. Limited Liability Companies: E  | Enter Nai | mes and Addresses  | s of at least one Member or Manager. |  |  |       |         |             |  |
| Office Held Nam  | ne        |  | Street or PO Address                 |  | City   | State | Country | Postal Code |  |
| MEMBER TREI  | NT DEE    | STEPHENS   | 4441 N WILLIAMSBURG                  |  | POCATELLO  | ID    | USA     | 83204       |  |
| 5. Organized Under the Laws of:  |           | 6. Annual Report must be signed.*  |                                      |  |  |       |         |             |  |
| ID   |           | Signature: Trent STephens  |                                      |  | Date: 09/22/2016   |       |         |             |  |
| W 129133   |           | Name (type or print): Trent STephens   |                                      |  | Title: Member  |       |         |             |  |
| Processed 09/22/2016   |           | * Electronically provided signatures are accepted as original signatures.  |                                      |  |  |       |         |             |  |