

No. W 94799		Due no later than Jul 31, 2018 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. OLD WEST CONCESSIONS, LLC LISA M GADDIS 6015 WHISPERING HILLS DR MARSING ID 83639		LISA M GADDIS 6015 WHISPERING HILLS DR MARSING ID 83639			
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 LISA M GADDIS	Street or PO Address 6015 WHISPERING HILLS DRIVE		City MARSING	State ID	Country USA	Postal Code 83639
5. Organized Under the Laws of: ID W 94799		6. Annual Report must be signed.* Signature: Lisa Gaddis Name (type or print): Lisa Gaddis Date: 08/13/2018 Title: Manager					
Processed 08/13/2018 * Electronically provided signatures are accepted as original signatures.							