

|                                                                                                                                                        |           |                                                                                                                                                |            |                                                          |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------------------------------|---------|-------------|--|
| No. <b>W 142279</b>                                                                                                                                    |           | <b>Due no later than Sep 30, 2017</b>                                                                                                          |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>       |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |           | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>SHOGUN APPAREL USA LLC<br>STEVE LUX<br>5025 FRAZIER DR<br>POST FALLS ID 83854 |            | STEVE LUX<br>5025 FRAZIER DR<br>POST FALLS ID 83854-8385 |         |             |  |
|                                                                                                                                                        |           |                                                                                                                                                |            | 3. <u>New</u> Registered Agent Signature:*               |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |           |                                                                                                                                                |            |                                                          |         |             |  |
| Office Held                                                                                                                                            | Name      | Street or PO Address                                                                                                                           | City       | State                                                    | Country | Postal Code |  |
| MEMBER                                                                                                                                                 | STEVE LUX | 5025 FRAZIER                                                                                                                                   | POST FALLS | ID                                                       | USA     | 83854       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 142279</b>                                                                                          |           | 6. Annual Report must be signed.*<br>Signature: Steve Lux<br>Name (type or print): Steve Lux<br>Date: 08/26/2017<br>Title: Member              |            |                                                          |         |             |  |
| Processed 08/26/2017                                                                                                                                   |           | * Electronically provided signatures are accepted as original signatures.                                                                      |            |                                                          |         |             |  |