

|                                                                                                                                                        |                   |                                                                                                                                                               |       |                                                            |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------|---------|------------------|--|
| No. <b>W 100242</b>                                                                                                                                    |                   | <b>Due no later than Feb 28, 2014</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>AMERICAN EXPERIENCE, LLC (THE)<br>BRIDGET C BARRUS<br>9439 STONEHILL COURT<br>BOISE ID 83709 |       | BRIDGET C BARRUS<br>9439 STONEHILL COURT<br>BOISE ID 83709 |         |                  |  |
|                                                                                                                                                        |                   |                                                                                                                                                               |       | 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                                                                                                                                                 | BENJAMIN E BARRUS | 9439 W STONEHILL COURT                                                                                                                                        | BOISE | ID                                                         | USA     | 83709            |  |
| MEMBER                                                                                                                                                 | BRIDGET C BARRUS  | 9439 W STONEHILL COURT                                                                                                                                        | BOISE | ID                                                         | USA     | 83709            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                   | 6. Annual Report must be signed.*                                                                                                                             |       |                                                            |         |                  |  |
| <b>ID<br/>W 100242</b>                                                                                                                                 |                   | Signature: Bridget Barrus                                                                                                                                     |       |                                                            |         | Date: 03/17/2014 |  |
|                                                                                                                                                        |                   | Name (type or print): Bridget Barrus                                                                                                                          |       |                                                            |         | Title: Member    |  |
| Processed 03/17/2014                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                     |       |                                                            |         |                  |  |