No. W 73083		Due no later than Apr 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MARK ELLINGSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BARREL ROOM NO. 6 LLC KIMBER GATES 3890 N SCHREIBER WAY COEUR D ALENE ID 83815		608 NORTHWEST BLVD STE 300 COEUR D'ALENE ID 83814 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
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
MANAGER KIMBEI	RLY S GA	ATES	3890 N SCHREIBER WAY	COEUR D'ALENE	ID	USA	83815
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 73083		Signature: Kimberly Gates		Date: 05/01/2014			
		Name (type or print): Kimberly Gates		Title: Managing Member			
rocessed 05/01/2014 * Electronically provided signatures are accepted as original signatures.							