

|  |               |   |          |  |         |                  |  |
|--|---------------|---|----------|--|---------|------------------|--|
| No. <b>W 144259</b>  |               | <b>Due no later than Nov 30, 2016</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>CODE OF THE WEST PRODUCTIONS LLC<br>MEGAN ZAVAGLIA<br>3695 MORNING SKY PL<br>MERIDIAN ID 83646 |          | MEGAN ZAVAGLIA<br>3695 MORNING SKY PL<br>MERIDIAN ID 83646 |         |                  |  |
|  |               |   |          | 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      |  |
| MANAGER  | MEGAN ZAVAGLI | 3695 MORNING SKY PL   | MERIDIAN | ID   | USA     | 83646            |  |
| 5. Organized Under the Laws of:  |               | 6. Annual Report must be signed.*   |          |  |         |                  |  |
| <b>ID<br/>W 144259</b>   |               | Signature: Megan Zavaglia   |          |  |         | Date: 12/17/2016 |  |
|  |               | Name (type or print): Megan Zavaglia  |          |  |         | Title: Co-Owner  |  |
| Processed 12/17/2016   |               | * Electronically provided signatures are accepted as original signatures.   |          |  |         |                  |  |