

No. W 132342	Due no later than Dec 31, 2015 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
	PETER JACOBSEN SPORTS, LLC MONICA L CRUZ 9400 SW BARNES RD SUITE 550 PORTLAND OR 97225		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	PETER JACOBSEN	9400 SW BARNES RD SUITE 550	PORTLAND	OR	USA	97225
5. Organized Under the Laws of: OR W 132342		6. Annual Report must be signed.* Signature: MONICA CRUZ Name (type or print): MONICA CRUZ Date: 12/03/2015 Title: CFO, DIRECTOR OF HR				
Processed 12/03/2015		* Electronically provided signatures are accepted as original signatures.				