| No. <b>W 150165</b>  |  |                                | 2. Registered Agent and Address (NO PO BOX) |       |         |             |
|--|--|--------------------------------|---|-------|---------|-------------|
| Return to:   | Annual Report Form   |                                | JAMES DAVID KNOECKLEIN                      |       |         |             |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed.  DAVID KNOECKLEIN FINE ART, LLC  JAMES DAVID KNOECKLEIN  5810 W HILL RD  BOISE ID 83703 |                                | 5810 W HILL RD<br>BOISE ID 83703            |       |         |             |
|  |  |                                | 3. New Registered Agent Signature:*         |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |  |                                |   |       |         |             |
| 4. Limited Liability Companies: Enter Na   | mes and Addresses of a   | t least one Member or Manager. |   |       |         |             |
| Office Held Name   |  | Street or PO Address           | City  | State | Country | Postal Code |
| MANAGER JAMES DAV  | 'ID KNOECKLEIN   | 5810 W. HILL RD                | BOISE                                       | ID    | USA     | 83703       |
| 5. Organized Under the Laws of:  | 6. Annual Report must be signed.*  |                                |   |       |         |             |
| ID   | Signature: James David Knoecklein  |                                | Date: 04/10/2016                            |       |         |             |
| W 150165   | Name (type or print): James David Knoecklein   |                                | Title: Registered Agent                     |       |         |             |
| Processed 04/10/2016   | * Electronically provided signatures are accepted as original signatures.  |                                |   |       |         |             |