| No. <b>W 139194</b>  |                | Due no later than Jun 30, 2015   |                                      | 2 | 2. Registered Agent and Address (NO PO BOX)                              |       |         |             |
|--|----------------|--|--------------------------------------|---|--|-------|---------|-------------|
| Return to:   |                | Annual Report Form   |                                      |   | ANDREW J ABRAMS  |       |         |             |
| 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.  RISE EXPERIENCE COLLECTIVE, LLC  ANDREW J ABRAMS  PO BOX 4001  MOSCOW ID 83843 |                                      |   | 411 N ALMON ST #210 MOSCOW ID 83843  3. New Registered Agent Signature:* |       |         |             |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                |  |                                      |   |  |       |         |             |
| 4. Limited Liability Compar  | nies: Enter Na | mes and Addresse   | s of at least one Member or Manager. |   |  |       |         |             |
| Office Held  | Name           |  | Street or PO Address                 |   | City   | State | Country | Postal Code |
| MEMBER   | ANDREW J       | ABRAMS   | PO BOX 4001                          |   | MOSCOW   | ID    | USA     | 83843       |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |                                      |   |  |       |         |             |
| ID   |                | Signature: Andrew J Abrams   |                                      |   | Date: 05/05/2015   |       |         |             |
| W 139194   |                | Name (type or print): Andrew J Abrams  |                                      |   | Title: Owner   |       |         |             |
| Processed 05/05/2015 * Electronically provided signatures are accepted as original signatures. |                |  |                                      |   |  |       |         |             |