

| | | | | | | |
|--|---|---|--|-------|---------|-------------|
| No. W 138217 | Due no later than May 31, 2017 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. 8BIT LLC CASEY ANDERWS 4912 W BLOOM ST BOISE ID 83703 | | BRIAN ANDREWS 4912 W BLOOM ST BOISE ID 83703 | | | |
| | | | 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 |
| MEMBER | CASEY ANDREWS | 4912 W BLOOM ST | BOISE | ID | USA | 83703 |
| 5. Organized Under the Laws of: ID W 138217 | 6. Annual Report must be signed.* Signature: Casey Andrews Name (type or print): Casey Andrews | | Date: 06/15/2017 Title: Owner | | | |
| Processed 06/15/2017 | | * Electronically provided signatures are accepted as original signatures. | | | | |