

No. W 71378	Due no later than Feb 28, 2014 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. SAM GOFF PRODUCTIONS LLC SAMUEL L. GOFF PO BOX 436 CASCADE ID 83611 USA		SAMUEL LEN GOFF 1600 AIRPORT WAY CASCADE ID 83411			
			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	SAMUEL GOFF	2315 W ANDERSON ST	BOISE	ID	USA	83702
5. Organized Under the Laws of: ID W 71378	6. Annual Report must be signed.* Signature: Samuel Goff Name (type or print): Samuel Goff		Date: 12/20/2013 Title: Manager			
Processed 12/20/2013		* Electronically provided signatures are accepted as original signatures.				