

No. W 70059		Due no later than Jan 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		1. Mailing Address: Correct in this box if needed. ADRENALINE PERFORMANCE, LLC CAM R HULSE 606 N STATE ST SHELLEY ID 83274		CAM R HULSE 1101 OCTOBER COVE SHELLEY 83274			
NO FILING FEE IF RECEIVED BY DUE DATE				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	CAM R HULSE	1101 OCTOBER COVE	SHELLEY	ID	83274		
MANAGER	TERRA A HULSE	1101 OCTOBER COVE	SHELLEY	ID	83274		
5. Organized Under the Laws of: ID W 70059		6. Annual Report must be signed.* Signature: Terra Hulse Name (type or print): Terra Hulse					
Processed 11/25/2014		Date: 11/25/2014 Title: Owner * Electronically provided signatures are accepted as original signatures.					