

No. <b>W 101526</b>	<b>Due no later than Mar 31, 2014 Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> DOUGLAS AUSTIN 21 BANK ST WALLACE ID 83873																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	1. Mailing Address: Correct in this box if needed. BATTERY BEAST, LLC DOUGLAS AUSTIN 21 BANK ST WALLACE ID 83873 USA		3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>DOUGLAS AUSTIN</td> <td>21 BANK ST WALLACE</td> <td>ID</td> <td>USA</td> <td></td> <td>83873</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>TERRI AUSTIN</td> <td>21 BANK ST WALLACE</td> <td>ID</td> <td>USA</td> <td></td> <td>83873</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	DOUGLAS AUSTIN	21 BANK ST WALLACE	ID	USA		83873	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	TERRI AUSTIN	21 BANK ST WALLACE	ID	USA		83873	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 101526</b>		6. Signature: <u><i>Douglas Austin</i></u> Date: <u>1-28-2014</u> Name (type or print): <u>DOUGLAS AUSTIN</u> Title: <u>OWNER</u>																																				

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the