

| | | | | | | | |
|--|--------------------|---|---------|---|---------|-------------|--|
| No. W 84784 | | Due no later than Jun 30, 2012 | | 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. BLACK DOG TACKLE, LLC JOE N DOUGLAS 361 SYRINGA DRIVE OROFINO ID 83544 USA | | CHARLENE DOUGLAS 361 SYRINGA DRIVE OROFINO ID 83544 | | | |
| | | | | 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 | CHARLENE A DOUGLAS | 361 SYRINGA DRIVE | OROFINO | ID | USA | 83544 | |
| MEMBER | JOE N DOUGLAS | 361 SYRINGA DRIVE | OROFINO | ID | USA | 83544 | |
| 5. Organized Under the Laws of: ID W 84784 | | 6. Annual Report must be signed.* Signature: Charlene Douglas Name (type or print): Charlene Douglas | | | | | |
| | | Date: 04/16/2012 Title: Co-owner | | | | | |
| Processed 04/16/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | |