

No. W 65484	Due no later than Aug 31, 2013 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) JOYCE CONSTANTINE 23258 STEPHEN LN PARMA ID 83660
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SKY PIRATE LLC JOYCE CONSTANTINE 23258 STEPHEN LN PARMA ID 83660		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Stewart Constantine 23258 Stephen Ln Parma Id USA 83660			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Joyce Constantine 23258 Stephen Ln Parma Id USA 83660			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Qudd Constantine 2101 Cinebar Boise, Id. USA 83709			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> IDAHO W 65484 </div>		6. Signature: <u>Joyce Constantine</u> Date: <u>8-30-13</u> Name (type or print): <u>Joyce Constantine</u> Title: <u>member</u>	
Issued 08/21/2013 by SLD		128936	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

the mailing address. If the