

No. <b>W 139276</b>		<b>Due no later than Jun 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  AL JAZZAB PARTNERS, LLC 4454 WAYSIDE DR NAPLES FL 34119		NEIL BRAVERMAN 22456 S ANDERSON LAKE RD HARRISON ID 83833			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name NEIL BRAVERMAN	Street or PO Address 4454 WAYSIDE DR		City NAPLES	State FL	Country USA	Postal Code 34119
5. Organized Under the Laws of:  <b>ID</b> <b>W 139276</b>		6. Annual Report must be signed.*  Signature: Neil Braverman Name (type or print): Neil Braverman  Date: 05/19/2015 Title: Manager					
Processed 05/19/2015      * Electronically provided signatures are accepted as original signatures.							