No. W 53556	De	Due no later than Aug 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE	1. Mailing A	Annual Report Form 1. Mailing Address: Correct in this box if needed. FRONT ROW EVENT AND PRODUCTION MANAGEMENT LLC CHARLES FABER 1414 CAMBRIDGE DRIVE IDAHO FALLS ID 83401		CHARLES FABER 1414 CAMBRIDGE DR IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	FRONT ROW CHARLES FA 1414 CAMBR						
NO FILING FEE IF RECEIVED BY DUE DATE	IDAHO FALLS						
4. Limited Liability Companies: Ente	r Names and Address	es of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER JANE E MANAGER CHARLE	FABER S R FABER	1414 CAMBRIDGE DRIVE 1414 CAMBRIDGE DRIVE	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83401 83401	
5. Organized Under the Laws of: 6. Annual		rt must be signed.*					
l NV	Signature: Ja	Signature: Jane Faber		Date: 08/13/2018			
W 53556	Name (type o	Name (type or print): Jane Faber		Title: Manager			
Processed 08/13/2018	* Electronically	* Electronically provided signatures are accepted as original signatures.					