| No. C 121349 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. FULL MOON, INC. 630 3RD AVE NORTH HAILEY ID 83333 | | [2 | 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 | | | | BRIAN AHERN 630 3RD AVE NORTH HAILEY ID 83333 3. New Registered Agent Signature:* | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| PRESIDENT | BRIAN W A | HERN | PO BOX 3627 | | HAILEY | ID | USA | 83333 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Brian W Ahern | | | Date: 10/05/2015 | | | |
| C 121349 | | Name (type or print): Brian W Ahern | | | Title: president | | | |
| Processed 10/05/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |