| No. W 144405 | | Due no later than Nov 30, 2015 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|------|---|----------------------|--|-------------------------------------|-------|---------|-------------|
| Return to: | | Annual Report Form | | GREG FADNESS | | | | |
| SECRETARY OF STATE | | 1. Mailing Address: Correct in this box if needed. | | 2767 CHAPARRAL CIRCLE TWIN FALLS ID 83301 | | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | FADNESS MADNESS MUSIC, LLC GREG FADNESS 2767 CHAPARRAL CIRCLE | | | TWINTALES ID 05501 | | | |
| | | TWIN FALLS ID 83301 | | | 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 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 PAMELA FAI | | DNESS | 2767 CHAPARRAL CIR | | TWINFALLS | ID | USA | 83301 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: PAMELA FADNESS | | | Date: 11/30/2015 | | | |
| W 144405 | | Name (type or print): PAMELA FADNESS | | | Title: MEMBER/AGENT | | | |
| Processed 11/30/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |