| No. <b>W 158262</b>  |                        | Due no later than Nov 30, 2016  |                                      | 2. Registered         | 2. Registered Agent and Address (NO PO BOX) |         |             |  |
|--|------------------------|---|--------------------------------------|-----------------------|---|---------|-------------|--|
| Return to:   |                        | Annual Report Form  |                                      |                       | KELLEN WILLIAMS                             |         |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                        | 1. Mailing Address: Correct in this box if needed.  CHIRON AUDIO LLC  KELLEN R WILLIAMS  615 N POND ST  BOISE ID 83706  USA |                                      | BOISE ID              | 615 N POND ST BOISE ID 83706                |         |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |                        |   |                                      | 3. <u>New</u> Registe | 3. <u>New</u> Registered Agent Signature:*  |         |             |  |
| 4. Limited Liability Compa   | nies: Enter Na         | mes and Addresses   | s of at least one Member or Manager. |                       |   |         |             |  |
| Office Held  | Name                   |   | Street or PO Address                 | City                  | State                                       | Country | Postal Code |  |
| MEMBER   | MBER KELLEN R WILLIAMS |   | 615 N POND ST                        | BOISE                 | ID  | USA     | 83706       |  |
| 5. Organized Under the Laws of:  |                        | 6. Annual Report must be signed.*   |                                      |                       |   |         |             |  |
| ID   |                        | Signature: Kell   |                                      | Date: 11/02/2016      |   |         |             |  |
| W 158262   |                        | Name (type or   |                                      | Title: Owner          |   |         |             |  |
| Processed 11/02/2016   |                        | * Electronically provided signatures are accepted as original signatures.   |                                      |                       |   |         |             |  |