| No. W 115093 | | Due no later than Jun 30, 2015 | | 2. | 2. Registered Agent and Address (NO PO BOX) | | | |
|------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----|-------------------------------------------------------------------------------------|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. HAVOC NATION LLC ANGELO QUINNEY PO BOX 2511 EAGLE ID 83616 USA | | | ANGELO QUINNEY 7872 W POWELL ST BOISE ID 83714 3. New Registered Agent Signature:* | | | |
| RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compa | anies: Enter Nai | nes and Addresses of at | least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | (| City | State | Country | Postal Code |
| MANAGER | ANGELO QUINNEY | | 7872 W POWELL ST | E | BOISE | ID | USA | 83616 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Angelo quinney | | | Date: 06/28/2015 | | | |
| W 115093 | | Name (type or print): Angelo quinney | | | Title: Manager | | | |
| Processed 06/28/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |