No. W 11264		Due no later than Mar 31, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		BRIAN E BAKER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	IMMERSIO BRIAN E	1. Mailing Address: Correct in this box if needed. IMMERSIONS, LLC BRIAN E BAKER 9600 W. BROOKSDIE LN. BOISE ID 83714 USA		9600 W. BROOKSIDE LN. BOISE ID 83714			
NO FILING FEE IF RECEIVED BY DUE DATI	USA			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: E	inter Names and Add	resses of at least one Member or Manager.					
Office Held Nam	e	Street or PO Address	City	State	Country	Postal Code	
MANAGER BRIA	N E BAKER	9600 W. BROOKSIDE LN	BOISE	ID	USA	83714	
5. Organized Under the Laws of: 6. Annual Rep		eport must be signed.*					
ID	Signature	Signature: Brian Baker Date: 01/27/2014					
W 11264	Name (ty	Name (type or print): Brian Baker Title: Manager					
Processed 01/27/2014	* Electronica	* Electronically provided signatures are accepted as original signatures.					