No. C 118181	Reinstatement Annual Report Form ADMIN DISSOLVED 05/08/2008	2. Registered Agent and Office (NOT A P.O. BOX) DAN FARILY TONY Schlamen
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. DIGITAL EFFECTS, INC. 913 W RIVER ST # 200 BOISE ID 83702	913 W RIVER STE #200 BOISE ID 83702
reinstatement fee due: \$30.00		3. New Registered Agent Signature.
4. Corporations: Ente Office Held President To	er Names and Business Addresses of President, Secre  Name Street or PO Address City  Siny Schlangen 2036Harrison Bld Bors	tary, Directors, Treasurer, Vice Pres.  State Country Postal Code  C(1) USA &3702
5. Organized Under the La IDAHO C 118181 Issued 08/17/2017 by TLB	Name (type of print):  Tony Schlangen	Date: / \$117/17 Title: President

\_\_\_\_\_FUED EFFECTIVE \_\_\_\_