No. W 84339		Due no later than Jun 30, 2013 2. Registered Agent and Address (NO PO BOX)					PO BOX)
Return to:		Annual Report Form		KAYLA CUELLAR 679 CRESTVIEW DR TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. VALIANT FIREARMS & AMMUNITION LLC KAYLA R CUELLAR 2545 ORCHARD DR EAST TWIN FALLS ID 83301					
4. Limited Liability Companie	es: Enter Nar	nes and Addresse	s of at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER VELMA CUEL			28105 RIVER RIDGE ROAD	WILDER	ID	USA	83676
MEMBER JUDITH THIE			641 BALLINGRUDE DR.	TWIN FALLS	ID	USA	83301
MEMBER	MICHAEL P	CUELLAR	679 CRESTVIEW DR.	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 84339		Signature: Kay	yla Cuellar	Date: 07/12/2013			
		Name (type or	print): Kayla Cuellar	Title: C.o.o.			
Processed 07/12/2013	* Electronically provided signatures are accepted as original signatures.						