No. **W 24050**	**Due no later than May 31, 2015** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** BLUE DEVIL LLC EMILY D QUINN 2454 N BOGUS BASIN RD BOISE ID 83702 USA	EMILY D QUINN 2454 N BOGUS BASIN RD BOISE ID 83702 3. New Registered Agent Signature:*

4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	EMILY D QUINN	5250 S FARMHOUSE PL	BOISE	ID		83716
MEMBER	PETER D QUINN	955 PARK AVE APT 1 SW	NEW YORK	NY		10028

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 24050**	Signature: Emily D Quinn	Date: 05/27/2015
	Name (type or print): Emily D Quinn	Title: Member

Processed 05/27/2015

* Electronically provided signatures are accepted as original signatures.