INITIAL/ANNUAL LIST OF MANAGERS OR MANAGIN BUSINESS LICENSE APPLICATION OF:		= ENTITY NUMBER
NAME OF LIMITED-LIABILITY COMPANY		
FOR THE FILING PERIOD OF TO		
USE BLACK INK ONLY - DO NOT HIGHLIGHT		
YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflun	ne.gov	
Return one file stamped copy. (If filing not accompanied by order in file stamped copy will be sent to registered agent.)	structions,	
IMPORTANT: Read instructions before completing and returning this form.		
 Print or type names and addresses, either residence or business, for all manager or ma members. A Manager, or if none, a Managing Member of the LLC must sign the form BE RETURNED IF UNSIGNED. 		
2. If there are additional managers or managing members, attach a list of them to this forn 3. Return completed form with the fee of \$150.00. A \$75.00 penalty must be added for fai form by the deadline. An annual list received more than 90 days before its due date shan amended list for the previous year.	lure to file this	ABOVE SPACE IS FOR OFFICE USE ONLY
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for fi	ailure to file form by deadline.	
5. Make your check payable to the Secretary of State. 6. Ordering Copies: If requested above, one file stamped copy will be returned at no add A copy fee of \$2.00 per page is required for each additional copy generated when or accompany your order.	dering 2 or more file stamped or certified	
Return the completed form to: Secretary of State, 202 North Carson Street, Carson CitForm must be in the possession of the Secretary of State on or before the last day of th		o is not acconted as receipt data \ Forms
received after due date will be returned for additional fees and penalties. Failure to incl		
ANNUAL LIST FILING FEE: \$150.00 LATE PENALTY: \$75.00 (if filing late)	BUSINESS LICENSE FEE: \$200.	00 LATE PENALTY: \$100.00 (if filling late)
CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX I	BELOW	NRS 76.020 Exemption Codes
Pursuant to NRS Chapter 76, this entity is exempt from the business licen	se fee. Exemption code:	001 - Governmental Entity 005 - Motion Picture Company
NOTE: If claiming an exemption, a notarized Declaration of Eligibility for	rm must be attached. Failure to	006 - NRS 680B.020 Insurance Co.
attach the Declaration of Eligibility form will result in rejection, which co		
NAME		
	MANAGER OR MAN	NAGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
NAME	MANIA OED OD MAN	NA CINO MEMBED
	MANAGER OR MAN	NAGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
NAME	MANAGER OR MAN	NACING MEMBER
	WANAGER OR WAI	ACINO WEWDER
ADDRESS	CITY	STATE ZIP CODE
NAME		
IVAIVIL	MANAGER OR MAN	NAGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
None of the managers or managing members identified in the list of managers and the identity of any person or persons exercising the power or authority of a manage		
I declare, to the best of my knowledge under penalty of perjury, that the information a category C felony to knowingly offer any false or forged instrument for filing in the	contained herein is correct and acknow	•
V	Title	Date
X		
Signature of Manager, Managing Member or		
Other Authorized Signature		Nevada Secretary of State List ManorMem