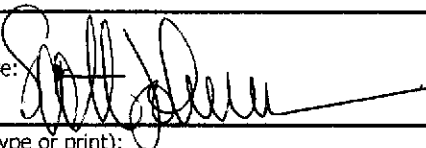


No. W 163550	Reinstatement Annual Report Form ADMIN DISSOLVED 06/28/2017		2. Registered Agent and Office (NOT A P.O. BOX) TIM JOHNSON 1900 N LAKES PLACE STE 100 MERIDIAN ID 83646
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BFG INVESTMENTS, LLC TIM JOHNSON 1900 N LAKES PLACE STE 100 MERIDIAN ID 83646 <div style="text-align: right;">➔</div> 1817 N. LAKES PLACE STE 100 MERIDIAN, ID 83646		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	TIM JOHNSON	4061 N. LEGACY WOODS AVE	MERIDIAN	ID	ADA	83646
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	SCOTT JOHNSON	3662 N. LEGACY WOODS AVE	MERIDIAN	ID	ADA	83646
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DARIN MILES	938 W. BLUE DOWNS ST.	MERIDIAN	ID	ADA	83646
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 163550 </div>	6. Signature:  <hr/> Name (type or print): <u>SCOTT JOHNSON</u> <div style="float: right; text-align: right;"> Date: <u>12/5/17</u> Title: <u>MEMBER</u> </div>
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Issued 12/05/2017 by JL1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

This form may not be altered through the use of this form. Pay special attention to the mailing address. If the