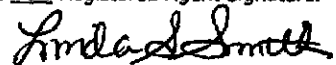



No. W 69745	Reinstatement Annual Report Form ADMIN DISSOLVED 03/27/2018		2. Registered Agent and Office (NOT A P.O. BOX) DAN SLATER Linda Smith 310 N MERIDIAN ST 810 Jewel STED BLACKFOOT ID 83221																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. PROFESSIONAL PAYROLL SERVICES LLC DAN SLATER Linda Smith 310 N MERIDIAN ST STED 810 Jewel BLACKFOOT ID 83221		3. New Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Linda Smith</td> <td>810 Jewel</td> <td>Blackfoot</td> <td>ID</td> <td>USA</td> <td>83221</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Tara Patterson</td> <td>810 Jewel</td> <td>Blackfoot</td> <td>ID</td> <td>USA</td> <td>83221</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Linda Smith	810 Jewel	Blackfoot	ID	USA	83221	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Tara Patterson	810 Jewel	Blackfoot	ID	USA	83221	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 69745	6. Signature:  Date: <u>6/27/18</u> Name (type or print): <u>Linda S Smith</u> Title: <u>Member</u>																																					