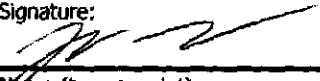


No. <b>W 94446</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 09/23/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> PRESERVE LLC (THE) THOMAS M COLEMAN <del>1859 S TOPAZ WAY #200</del> <b>3103 W.</b> MERIDIAN ID 83642 <b>Sheryl Dr.,</b> <b>Suite 100</b>		COLEMAN HOMES LLC <del>1859 S TOPAZ WAY #200</del> <b>3103 W.</b> MERIDIAN ID 83642 <b>Sheryl</b> <b>Dr., Ste. 100</b>																																			
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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6">Coleman Homes LLC, 3103 W. Sheryl Dr., Suite 100, Meridian, ID 83642</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td colspan="6">Coleman Real Estate Holdings LLC, 3103 W. Sheryl Dr., Suite 100, Meridian, ID 83642</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>		Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Coleman Homes LLC, 3103 W. Sheryl Dr., Suite 100, Meridian, ID 83642						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Coleman Real Estate Holdings LLC, 3103 W. Sheryl Dr., Suite 100, Meridian, ID 83642						Manager <input type="checkbox"/> Member <input type="checkbox"/>							3. <u>New</u> Registered Agent Signature.	
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 94446</b>		6. Signature:  Date: <b>10/6/19</b> Name (type or print): <b>Ryan Hammons</b> Title: <b>Treasurer</b>																																				

Issued 10/06/2014 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**