

| No. <b>W 23294</b>                                                                                                                                | <b>Reinstatement Annual Report Form</b><br><b>ADMIN DISSOLVED 06/05/2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                    |                      | 2. Registered Agent and Office (NOT A P.O. BOX)<br><del>DOUGLAS M CHRISTENSEN</del><br><del>162 BARLOW RD</del><br><del>KETCHUM ID 83340</del><br>ROBERT KORB<br>128 Saddle Rd, #103<br>Ketchum, ID 83340 |                                                                                               |                   |             |                                         |               |       |         |             |                                          |                                           |                   |             |         |    |
|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------|-------------|-----------------------------------------|---------------|-------|---------|-------------|------------------------------------------|-------------------------------------------|-------------------|-------------|---------|----|
| Return to:<br><br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT<br/>FEE DUE: \$30.00</b> | 1. Mailing Address: Correct in this box if needed.<br><br>CFF VIRGINIA BEACH, LLC<br><br>HC 64 BOX 8288<br>KETCHUM ID 83340                                                                                                                                                                                                                                                                                                                                                                                     |                      | 3. New Registered Agent Signature.<br>                                                                                 |                                                                                               |                   |             |                                         |               |       |         |             |                                          |                                           |                   |             |         |    |
|                                                                                                                                                   | 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><input checked="" type="radio"/> Manager</td><td><input type="radio"/> Member (circle one)</td><td>Aimee Christensen</td><td>PO Box 8000</td><td>Ketchum</td><td>ID</td><td>USA 83340</td></tr></tbody></table> |                      |                                                                                                                                                                                                           |                                                                                               | Manager or Member | Name        | Street or PO Address                    | City          | State | Country | Postal Code | <input checked="" type="radio"/> Manager | <input type="radio"/> Member (circle one) | Aimee Christensen | PO Box 8000 | Ketchum | ID |
| Manager or Member                                                                                                                                 | Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Street or PO Address | City                                                                                                                                                                                                      | State                                                                                         | Country           | Postal Code |                                         |               |       |         |             |                                          |                                           |                   |             |         |    |
| <input checked="" type="radio"/> Manager                                                                                                          | <input type="radio"/> Member (circle one)                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Aimee Christensen    | PO Box 8000                                                                                                                                                                                               | Ketchum                                                                                       | ID                | USA 83340   |                                         |               |       |         |             |                                          |                                           |                   |             |         |    |
| 5. Organized Under the Laws of:<br><br><b>IDAHO</b><br><b>W 23294</b>                                                                             | 6. <table border="1"><tr><td>Signature: </td><td colspan="2">Date: 02/22/12</td></tr><tr><td>Name (type or print): Aimee Christensen</td><td colspan="2" rowspan="2">Title: Member</td></tr></table>                                                                                                                                                                                                                          |                      |                                                                                                                                                                                                           | Signature:  | Date: 02/22/12    |             | Name (type or print): Aimee Christensen | Title: Member |       |         |             |                                          |                                           |                   |             |         |    |
| Signature:                                                      | Date: 02/22/12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                      |                                                                                                                                                                                                           |                                                                                               |                   |             |                                         |               |       |         |             |                                          |                                           |                   |             |         |    |
| Name (type or print): Aimee Christensen                                                                                                           | Title: Member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                      |                                                                                                                                                                                                           |                                                                                               |                   |             |                                         |               |       |         |             |                                          |                                           |                   |             |         |    |
| Issued 02/09/2012 by LJM                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                      |                                                                                                                                                                                                           |                                                                                               |                   |             |                                         |               |       |         |             |                                          |                                           |                   |             |         |    |