

|   |                                 |  |  |  |  |  |
|---|---------------------------------|--|--|--|--|--|
| <b>No. W 95468</b>  |                                 | <b>Reinstatement Annual Report Form</b><br><b>ADMIN DISSOLVED 11/03/2011</b>   |  | <b>2. Registered Agent and Office<br/>(NOT A P.O. BOX)</b>   |  |  |
| Return to:<br><b>SECRETARY OF STATE<br/>450 N 4th STREET<br/>PO BOX 83720<br/>BOISE, ID 83720-0080</b>                      |                                 | 1. Mailing Address: Correct in this box if needed.<br><b>PARAGON VENTURES, LLC<br/>TYLER M JOHNSON<br/>1605 W FAIRVIEW AVE<br/>BOISE ID 83702</b>        |  | <b>TYLER M JOHNSON<br/>1605 W FAIRVIEW AVE<br/>BOISE ID 83702</b><br><b>5242 FARROW ST<br/>BOISE, ID 83713</b> |  |  |
| <b>REINSTATEMENT FEE<br/>Due: \$30.00</b>   |                                 | <b>5242 FARROW ST<br/>BOISE ID 83713</b>   |  | <b>3. New Registered Agent Signature.</b>  |  |  |
| <b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>                  |                                 |  |  |  |  |  |
| <b>Manager or Member</b> <b>Name</b> <b>Street or PO Address</b> <b>City</b> <b>State</b> <b>Country</b> <b>Postal Code</b> |                                 |  |  |  |  |  |
| Manager <input checked="" type="checkbox"/>   | Member <input type="checkbox"/> | TYLER M. JOHNSON 5242 FARROW ST BOISE, ID 83713  |  |  |  |  |
| Manager <input type="checkbox"/>  | Member <input type="checkbox"/> |  |  |  |  |  |
| Manager <input type="checkbox"/>  | Member <input type="checkbox"/> |  |  |  |  |  |
| Manager <input type="checkbox"/>  | Member <input type="checkbox"/> |  |  |  |  |  |
| <b>5. Organized Under the Laws of:</b>  |                                 |  |  |  |  |  |
| <b>IDAHO<br/>W 95468</b>  |                                 | <b>6.</b><br>Signature: <br>Name type or print: <b>Tyler M. Johnson</b> |  |  |  |  |
|   |                                 | Date: <b>11/08/2012</b>  |  |  |  |  |
|   |                                 | Title: <b>Manager</b>  |  |  |  |  |
| <b>Issued 10/29/2012 by SLD</b>   |                                 |  |  |  |  |  |
| <b>INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM</b>  |                                 |  |  |  |  |  |