

No. W 83034	Reinstatement Annual Report Form ADMIN DISSOLVED 07/08/2010		2. Registered Agent and Office (NOT A P.O. BOX) DAVID ROBINSON 1853 S 400 W 145 N. Lincoln Ave OAKLEY ID 83346				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	<p>1. Mailing Address: Correct in this box if needed.</p> <p>BIRCH CREEK FOODS, LLC</p> <p>PO BOX 157 OAKLEY ID 83346</p>		3. New Registered Agent Signature.				
REINSTATEMENT FEE DUE: \$30.00							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager or Member Manager Member (circle one)	Name	Street or PO Address	City	State	Country	Postal Code	
<input checked="" type="radio"/>	David Robinson	PO Box 157	Oakley	ID	USA	83346	
5. Organized Under the Laws of:		6.					
IDAHO W 83034		Signature:	<u>David Robinson</u>			Date: 4/30/11	
		Name (type or print):	<u>David Robinson</u>			Title: Owner	
Issued 04/20/2011 by SLD							

INSTRUCTIONS FOR THE ANNUAL REPORT FORM