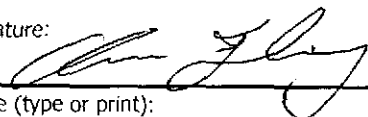


No. W 172404		Reinstatement Annual Report Form ADMIN DISSOLVED 12/28/2017		2. Registered Agent and Office (NOT A P.O. BOX) AARON FLEMING 546 S TETON AVE SUGAR CITY ID 83448																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. FLEMING REAL ESTATE INVESTMENT PROPERTIES LLC AARON FLEMING 546 S TETON AVE SUGAR CITY ID 83448		3. <u>New</u> 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 checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>AARON FLEMING</td><td>546 S. Teton Ave</td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td>SUGAR CITY ID 83448</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><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 checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	AARON FLEMING	546 S. Teton Ave					Manager <input type="checkbox"/> Member <input type="checkbox"/>		SUGAR CITY ID 83448					Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																		
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	AARON FLEMING	546 S. Teton Ave																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>		SUGAR CITY ID 83448																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																								
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																								
5. Organized Under the Laws of: IDAHO W 172404		6. Signature:  Name (type or print): <u>Aaron Fleming</u> Date: <u>1/11/18</u> Title: <u>Owner</u>																																						
Issued 01/12/2018 by online																																								