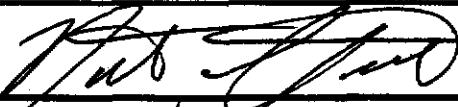


No. W 77986	Reinstatement Annual Report Form ADMIN DISSOLVED 12/09/2011		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed.		NATHANIEL RL MORRIS 1601 ESSINGTON CT NAMPA ID 83686	
	DISASTER MITIGATION COMPANY, LLC NATHANIEL RL MORRIS 1601 ESSINGTON CT NAMPA ID 83686		3. <u>New</u> Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
<u>Manager</u> or Member Name	Street or PO Address	City	State	Country Postal Code
Manager ☒ Member (circle one)				
	Nate Morris 1601 Essington Ct	Nampa	Id	83686
5. Organized Under the Laws of: IDAHO W 77986		6. Signature:  Date: <u>12-13-11</u> Name (type or print): <u>Nate Morris</u> Title: <u>owner</u>		
Issued 12/13/2011 by KAH				