

No. C 185705	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012		2. Registered Agent and Office (NOT A P.O. BOX) BLAKE MANWARING 245 ENSIGN DR IDAHO FALLS ID 83406															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. MANWARING CHEESE INC BLAKE MANWARING 245 ENSIGN DR IDAHO FALLS ID 83406		3. <u>New</u> Registered Agent Signature.															
REINSTATEMENT FEE DUE: \$30.00																		
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"> <thead> <tr> <th>Office Held</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>President</td> <td>Blake Manwaring</td> <td>245 ENSIGN DR</td> <td>Ammon Id</td> <td>Idaho USA</td> <td></td> <td>83406</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Blake Manwaring	245 ENSIGN DR	Ammon Id	Idaho USA		83406
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
President	Blake Manwaring	245 ENSIGN DR	Ammon Id	Idaho USA		83406												
5. Organized Under the Laws of: IDAHO C 185705		6. Signature: <u>Blake Manwaring</u> Name (type or print): <u>BLAKE MANWARING</u>			Date: <u>6-24-12</u> Title: <u>OWNER</u>													
Issued 05/01/2012 by SLD																		