
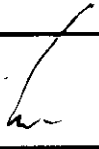


No. W 100592	Reinstatement Annual Report Form ADMIN DISSOLVED 05/10/2013		2. Registered Agent and Office (NOT A P.O. BOX) UNITED STATES CORPORATION AGEN 950 BANNOCK ST STE 1100 BOISE ID 83702 USA <i>Travis Mullen</i> <i>16970 N Thurgood loop</i> <i>Nampa ID 83687</i>																																			
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. EARTH CONCEPTS LLC KEVIN A DUNN 1024 N PURPLE SAGE WAY EAGLE ID 83616 <i>11500 SE 90th Ave Apt 933</i> <i>Happy Valley, OR 97086</i>		3. <u>New</u> Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Joseph J. DeKan</td> <td>1118 W. Dakota Ave.</td> <td>Nampa</td> <td>ID</td> <td>US</td> <td>83686</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Travis B. Mullen</td> <td>16970 N. Thurgood Loop</td> <td>Nampa</td> <td>ID</td> <td>US</td> <td>83687</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Cameron M. Dunn</td> <td>16559 Chino Ave</td> <td>Cabluwell</td> <td>ID</td> <td>US</td> <td>83607</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Joseph J. DeKan	1118 W. Dakota Ave.	Nampa	ID	US	83686	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Travis B. Mullen	16970 N. Thurgood Loop	Nampa	ID	US	83687	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Cameron M. Dunn	16559 Chino Ave	Cabluwell	ID	US	83607	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 100592 </div>		6. Signature:  <hr/> Name (type or print): <i>Travis Mullen</i> <hr/> <div style="display: flex; justify-content: space-between;"> <div> Date: <i>4-20-15</i> <hr/> Title: <i>Manager</i> <hr/> </div> </div>																																				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM