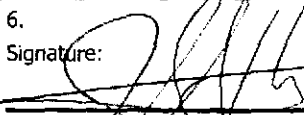
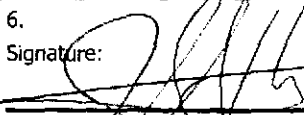
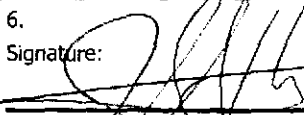


No. <b>W 149380</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 06/28/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JEREB ALLEN 502 E BOWER ST MERIDIAN ID 83642																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> UNITED RECOVERY SERVICES OF IDAHO, LLC PO BOX 431 MERIDIAN ID 83680 USA		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 type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>JEREB ALLEN</td><td>PO BOX 431</td><td>MERIDIAN</td><td>ID</td><td>US</td><td>83642</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><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 type="checkbox"/> Member <input checked="" type="checkbox"/>	JEREB ALLEN	PO BOX 431	MERIDIAN	ID	US	83642	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>					
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5. Organized Under the Laws of:  <b>IDAHO W 149380</b>	6. <table border="1"><tr><td>Signature:</td><td></td><td>Date:</td><td>7-5-17</td></tr><tr><td>Name (type or print):</td><td>JEREB ALLEN</td><td>Title:</td><td>OWNER</td></tr></table>				Signature:		Date:	7-5-17	Name (type or print):	JEREB ALLEN	Title:	OWNER																											
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Issued 07/05/2017 by TLB