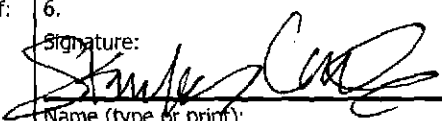


No. W 150723 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 07/28/2016 1. Mailing Address: Correct in this box if needed. T BONE CATTLE COMPANY LLC SKYLER T COLLINS 2715 E 3650 N TWIN FALLS ID 83301	2. Registered Agent and Office (NOT A P.O. BOX) SKYLER T COLLINS 2715 E 3650 N TWIN FALLS ID 83301 3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.		
Manager or Member Name Street or PO Address City State Country Postal Code		
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> Skyler Collins 2715 E 3650 N Twin Falls ID US 83301		
Manager <input type="checkbox"/> Member <input type="checkbox"/>		
Manager <input type="checkbox"/> Member <input type="checkbox"/>		
Manager <input type="checkbox"/> Member <input type="checkbox"/>		
5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 150723 </div>	6. Signature:  Name (type or print): <u>Skyler Collins</u> Date: <u>9-28-16</u> Title: <u>Owner</u>	
Issued 09/28/2016 by online		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM