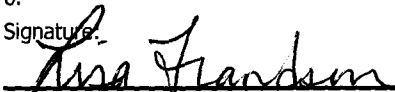
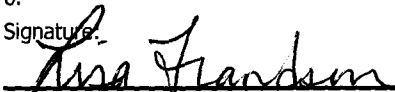
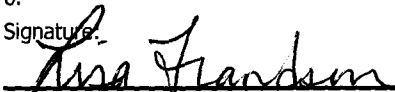


No. <b>W 87517</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 01/13/2012</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> THOMAS J HOLMES 203 S GARFIELD POCA TELLO ID 83204
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> IDAHIO INVESTMENT, LLC <del>131 MILNER</del> <b>425 W. Pine</b> <del>GRANVILLE OH 43023</del> <b>Pocatello, ID 83201</b>		3. <u>New</u> Registered Agent Signature.
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			

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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Lisa Frandsen	425 W Pine	Pocatello	ID	Bannock	83201
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-weight: bold;">IDAHO W 87517</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:              Name (type or print):  <b>Lisa Frandsen</b> </td> <td style="width: 40%;">           Date:  <b>8/21/16</b>            Title:  <b>member</b> </td> </tr> </table>	Signature:  Name (type or print): <b>Lisa Frandsen</b>	Date: <b>8/21/16</b> Title: <b>member</b>
Signature:  Name (type or print): <b>Lisa Frandsen</b>	Date: <b>8/21/16</b> Title: <b>member</b>		