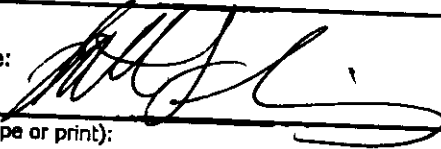


No. <b>W 92592</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 07/12/2011</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> NATE FLEMING 546 S TETON AVE SUGAR CITY ID 83448																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. LEGACY ENTERPRISES, LLC NATE FLEMING 546 S TETON AVE SUGAR CITY ID 83448																																					
			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>Nate Fleming</td><td>546 S Teton Ave</td><td>Sugar City</td><td>ID</td><td></td><td>83448</td></tr><tr><td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>Any Fleming</td><td>546 S Teton Ave</td><td>Sugar City</td><td>ID</td><td></td><td>83448</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"/>	Nate Fleming	546 S Teton Ave	Sugar City	ID		83448	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Any Fleming	546 S Teton Ave	Sugar City	ID		83448	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</b> <b>W 92592</b>		6. Signature:  Name (type or print): <u>Nate Fleming</u>  Date: _____ Title: _____ <u>Member</u>																																				
Issued 02/28/2013 by DK1																																						