

No. W 130216		Reinstatement Annual Report Form ADMIN DISSOLVED 01/22/2018		2. Registered Agent and Office (NOT A P.O. BOX) ROGER TODD MOFFIS 3243 S POWERLINE RD MELBA ID 83641-8364																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MOFFIS INVESTMENTS, LLC ROGER T Moffis 3243 S POWERLINE RD MELBA ID 83641 USA		3. New Registered Agent Signature.																																				
REINSTATEMENT FEE DUE: \$30.00																																								
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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Roger T. Moffis</td> <td>3243 S. Powerline Rd.</td> <td>Melba</td> <td>ID</td> <td>U.S.A.</td> <td>83641</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Marin L. Mendivil-Moffis</td> <td>3243 S. Powerline Rd.</td> <td>Melba</td> <td>ID</td> <td>U.S.A.</td> <td>83641</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Roger T. Moffis	3243 S. Powerline Rd.	Melba	ID	U.S.A.	83641	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Marin L. Mendivil-Moffis	3243 S. Powerline Rd.	Melba	ID	U.S.A.	83641	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: IDAHO W 130216		6. Signature: <u>Roger T. Moffis</u> Date: <u>1/26/18</u> Name (type or print): <u>Roger T. Moffis</u> Title: <u>Manager</u>																																						
Issued 01/26/2018 by online																																								