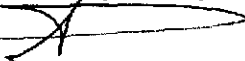
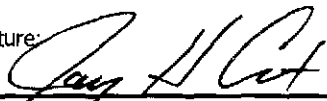


No. <b>W 88125</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/18/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. CURTIS ROAD III, LLC IDAHO ESTATE PLANNING PC 453 S FITNESS PLAZA EAGLE ID 83616		Need to Appoint <b>Idaho Estate Planning PC</b> <b>453 S. Fitness Plaza</b> <b>Eagle, ID 83616</b>  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>Jay and Carol Cox Living Trust</td> <td>1375 Sunset Dr.</td> <td>Ontario</td> <td>OR.</td> <td>USA</td> <td>97914</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"/>	Jay and Carol Cox Living Trust	1375 Sunset Dr.	Ontario	OR.	USA	97914	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</b> <b>W 88125</b>	6. Signature:  Date: <b>09/17/15</b> Name (type or print): <b>Jay H. Cox</b> Title: <b>Trustee - Living Trust</b>																																					

Issued 09/17/2015 by online

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**