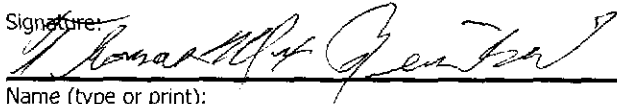


No. W 8825	Due no later than May 31, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) THOMAS MAX REINLAND 160 SOUTH PLEASANT VIEW RD POST FALLS ID 83854
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. REIN-BECK, LLC THOMAS MAX REINLAND PO BOX 15228 SPOKANE WA 99215		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 type="checkbox"/> Member <input checked="" type="checkbox"/> Thomas Max Reinland PO Box 15228 Spokane WA 99215			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Carole E REINLAND PO Box 15228 Spokane WA 99215			
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; font-size: large;"> IDAHO W 8825 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature:  Name (type or print): <u>Thomas Max Reinland</u> </div> <div style="width: 35%;"> Date: <u>05-11-16</u> Title: <u>Pres</u> </div> </div>	
Issued 04/20/2016 by CLH		129970	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the