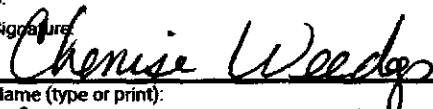


No. W 162686	Reinstatement Annual Report Form ADMIN DISSOLVED 06/28/2017		2. Registered Agent and Office (NOT A P.O. BOX) CHENISE WEEDOP 1824 S HWY 27 OAKLEY ID 83346
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. GMA FUND L.L.C. CHENISE WEEDOP 1824 S HWY 27 OAKLEY ID 83346		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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Chenise Weedop	1824 S. Hwy 27	Oakley,	ID	Cassia	83346
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: IDAHO W 162686	6. Signature:  Name (type or print): Chenise Weedop	Date: 9/27/17 Title: Owner/Manager
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Issued 09/27/2017 by online