

No. <b>W 44487</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 02/06/2008</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>  JAMES BAKER <del>6372 N HEATHROW CT</del> <del>BOISE ID 83713</del> 2209 E Comisky St. Meridian, ID 83646																												
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. B-SQUARE, LLC <del>6372 N HEATHROW CT</del> <del>BOISE ID 83713</del> 2209 E. Comisky St. Meridian, ID 83646		3. <u>New</u> Registered Agent Signature.																												
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																															
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																					
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5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 44487</b> </div>		6. Signature: <u>James Baker</u> Date: <u>4/24/13</u> Name (type or print): <u>James Baker</u> Title: <u>MANAGER</u>																													
Issued 04/24/2013 by PEH																															

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM