No. C 164818	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012	2. Registered Agent and Office (NOT A P.O. BOX) BENJAMIN JARDINE 3379 EAST 500 NORTH LEWISVILLE ID 83431
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. FRONTIER HOMES, INC. ANDREA JARDINE 3379 EAST 500 NORTH LEWISVILLE ID 83431 USA	
REINSTATEMENT FEE DUE: \$30.00	486 N. 3479 E. Lewisulle, 10 83431	3. New Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. Office Held Name Street or PO Address City State Country Postal Code President Benjamin Jardine 486 N. 3479 E. Lewis Ville 10 23431 V. Pres. Andrea Jardine 486 N. 3479 E. Lewis Ville 10 83431		
5. Organized Under the La IDAHO C 164818 Issued 10/17/2016 by onlin	Signature: Name (type or print): Benjamin Jardine	Date: 10/21/16 Title: President

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM