

No. W 95281	Reinstatement Annual Report Form ADMIN DISSOLVED 10/11/2013		2. Registered Agent and Office (NOT A P.O. BOX) JIMMY L JORGENSEN 310 RIVER RUN DR KETCHUM ID 83340																																			
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. JORGENSEN BUILDERS, LLC JIMMY L JORGENSEN PO BOX 875 KETCHUM ID 83340 USA																																					
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 ☒ Member ☐</td> <td>JIMMY L. JORGENSEN,</td> <td>Box 875,</td> <td>Ketchum,</td> <td>ID,</td> <td></td> <td>83340</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☐	JIMMY L. JORGENSEN,	Box 875,	Ketchum,	ID,		83340	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐							3. New Registered Agent Signature.
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
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5. Organized Under the Laws of: IDAHO W 95281		6. Signature:  Name (type or print): <u>JIMMY L. JORGENSEN</u> Date: <u>11/12/13</u> Title: <u>owner</u>																																				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT