No. W 113308	Reinstatement Annual Report Form ADMIN DISSOLVED 07/26/2017	2. Registered Agent and Office (NOT A P.O. BOX) JANET D ROBNETT 435 W HANLEY AVE STE 101 COEUR D ALENE ID 83815
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. SPRING ROCK RANCH LLC JOHN A TOMLINSON 2631 EAST SPRING ROCK LANE HAYDEN ID 83835	
REINSTATEMENT FEE DUE: \$30.00	TIATIBLE 20 03030	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 Member JOHN A. TOMLINSON 2631 E. SPRING ROCK LN. HAYDEN ID USA 83835		
Manager Member CARMA J. TOMLINSON 2631 E. SPRING ROCK LN. HAYDEN ID USA 83835		
Manager Member		
Manager Member		
5. Organized Under the La	ws of: 6. Signature: 0 0	Date:
IDAHO	(Jana 1 5	08/97/2017
W 113308	Name (type or print): JOHN A. TOMLINSON	Title: MEMBER

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM