

No. W 80541	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012		2. Registered Agent and Office (NOT A P.O. BOX) OLBUBE CHUKWURAH 1911 E 17TH ST SUITE 60 IDAHO FALLS ID 83404 249 Colonial way Idaho Falls, ID 83404
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. BARGAIN OCEAN MARKETING LLC EBUBE CHUKWURAH 1911 E 17TH ST SUITE 60 249 Colonial way IDAHO FALLS ID 83404 Idaho Falls ID 83404		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 checked="" type="checkbox"/> Olube chukwurah 249 Colonial way, IDAHO FALLS, ID 83404			
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: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 80541 </div>	6. Signature: <u><i>Olube chukwurah</i></u> Date: <u>7/13/12</u> <hr/> Name (type or print): <u>EBUBE CHUKWURAH</u> Title: <u>7/13/12</u>		

Issued 07/10/2012 by KAH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the