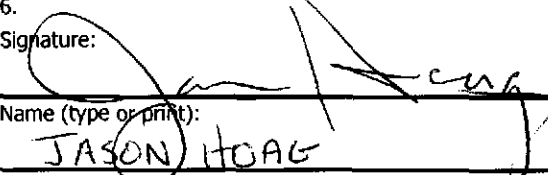


<b>No. W 145948</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 03/07/2016</b>  <b>1. Mailing Address: Correct in this box if needed.</b> GALENA GARDENS, LLC PO BOX 3646 KETCHUM ID 83340	<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> JASON HOAG 1904 WARM SPRINGS RD - unit 8 KETCHUM ID 83340 - 3646  <b>3. <u>New</u> Registered Agent Signature.</b>																																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <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> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>JASON HOAG</td> <td>P.O. Box 3646</td> <td>KETCHUM,</td> <td>ID</td> <td>BLAINE</td> <td>83340</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></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 <input type="checkbox"/> Member <input checked="" type="checkbox"/>	JASON HOAG	P.O. Box 3646	KETCHUM,	ID	BLAINE	83340	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 145948</b> </div>	<b>6.</b> Signature:  <hr/> Name (type or print): <u>JASON HOAG</u> <hr/> Date: <u>5/19/16</u> <hr/> Title: <u>OWNER/MEMBER</u>																																				

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM