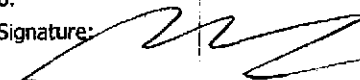


No. W 106564	Reinstatement Annual Report Form ADMIN DISSOLVED 12/17/2013		2. Registered Agent and Office (NOT A P.O. BOX) JOHN MILLER 206 INDIANA AVE STE 200 COEUR D ALENE ID 83814																																										
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. ALPHA EQUITY, LLC 212 IRONWOOD DR STE D-141 COEUR D ALENE ID 83814		3. <u>New</u> Registered Agent Signature.																																										
REINSTATEMENT FEE DUE: \$30.00																																													
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																													
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>MIKE RAI</td> <td>C/O ALPHA EQUITY, LLC</td> <td>COEUR D ALENE</td> <td>ID</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>212 E. Ironwood DR #D-141</td> <td></td> <td></td> <td></td> <td>83814.</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	MIKE RAI	C/O ALPHA EQUITY, LLC	COEUR D ALENE	ID					212 E. Ironwood DR #D-141				83814.	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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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">W 106564</div>		6. Signature:  <hr/> Name (type or print): <u>MIKE RAI</u> <hr/> <div style="text-align: right;"> Date: <u>5/8/14.</u> Title: _____ </div>																																											
Issued 05/08/2014 by online																																													

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM