No. W 23917	Reinstatement Annual Report Form ADMIN DISSOLVED 07/28/2016 2. Registered Agent and Office (NOT A P.O. BOX) DAVID A JOHNSON
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. SAGEWOOD, LLC PETER ESTAY 1112 SKI HILL RD DRIGGS ID 83422 TD FOLUS TD A77 SHOUP STE 109 IDAHO FALLS ID 83402 FILEI
REINSTATEMENT FEE DUE: \$30.00	83 205 3. New Registered Agent Signature.
4. Limited Liability Manager or Member	Companies: Enter Names and Addresses of Managers OR Members. See Instructions. Name Street or PO Address City State Country Postal Code
Manager Member 🗌	Larry D.Tweedie 6959 S. Marble Circle Idaho Falls ID USA 83406
Manager Member	
Manager Member	
Manager Member 🗌	
5. Organized Under the La	ws of: 6. Signature: Date: 3/20/200
W 23917	Name (type or print): Title: Larry D. Tweedie Manager
issued 03/17/2017 by onin	