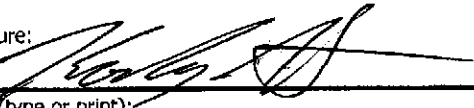
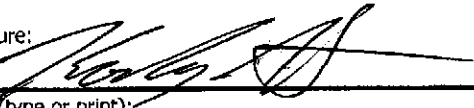
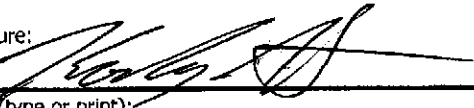


<p>No. <b>W 123253</b></p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p><b>REINSTATEMENT FEE DUE: \$30.00</b></p>	<p><b>Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2015</b></p> <p>1. Mailing Address: Correct in this box if needed. STEINHART TOOLS, LLC KODY STEINHART <del>2698 N SHOOTING STAR</del> <b>167 E HANLEY AVE</b> <del>POST FALLS ID 83854</del> <b>DALTON GARDENS, ID 83815</b></p>	<p>2. Registered Agent and Office (NOT A P.O. BOX) KODY STEINHART <del>2698 N SHOOTING STAR</del> <del>POST FALLS ID 83854 USA</del> <b>167 E HANLEY AVE</b> <b>DALTON GARDENS, ID 83815</b></p> <p>3. <u>New</u> Registered Agent Signature.</p>																																			
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table border="1"><thead><tr><th>Manager or Member</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>KODY STEINHART,</td><td>167 E HANLEY</td><td>DALTON</td><td>GA</td><td>USA</td><td>83815</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"/>	KODY STEINHART,	167 E HANLEY	DALTON	GA	USA	83815	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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<p>5. Organized Under the Laws of:</p> <p><b>IDAHO W 123253</b></p>	<p>6.</p> <table border="1"><tr><td>Signature: </td><td>Date: <b>3-2-17</b></td></tr><tr><td>Name (type or print): <b>KODY STEINHART</b></td><td>Title: <b>MEMBER</b></td></tr></table>		Signature: 	Date: <b>3-2-17</b>	Name (type or print): <b>KODY STEINHART</b>	Title: <b>MEMBER</b>																															
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**FILED**