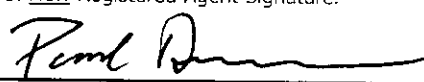



No. W 129026	Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2014		2. Registered Agent and Office (NOT A P.O. BOX) Paul Duncan 1404 East 500 North Jackson, ID 83350
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. 3D HOLDINGS LLC Paul Duncan 1404 East 500 North Jackson, ID 83350		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"/> Paul Duncan 1404 E. 500 N. Jackson ID Minidoka 83350			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Jason H. Duncan 498 S. 450 E. Burley ID Cassia 83318			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Duncan Limited Partnership 1404 E. 500 N. Jackson ID Minidoka 83350			
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 129026 </div>		6. Signature:  <hr/> Name (type or print): <div style="text-align: center;">Paul Duncan</div>	
		Date: <div style="text-align: center;">1-26-2015</div> <hr/> Title: <div style="text-align: center;">Manager</div>	
Issued 01/23/2015 by online			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM