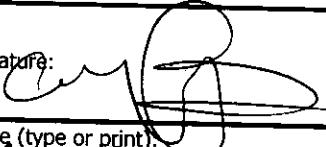


FILED EFFECTIVE

| | | | | | | |
|---|--|---|--------------------|---|-----------------------|------------------------------------|
| No. W 79747 | Reinstatement Annual Report Form ADMIN DISSOLVED 03/12/2012 | | | 2. Registered Agent and Office (NOT A P.O. BOX) COREY J RIPPEE 1111 WEST JEFFERSON ST STE 530 BOISE ID 83702 | | |
| 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. WDRP, LLC COREY J RIPPEE 349 WEST HALE ST BOISE ID 83706 USA | | | 1111 W. Jefferson St. Ste 530 Boise ID 83702 | | |
| REINSTATEMENT FEE DUE: \$30.00 | | | | 3. New Registered Agent Signature. | | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. | | | | | | |
| Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> | Name <i>Mary Munger</i> | Street or PO Address <i>1208 mill Rd. McCall Id. Valley 83636</i> | City <i>McCall</i> | State <i>Id.</i> | Country <i>Valley</i> | Postal Code <i>83636</i> |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| 5. Organized Under the Laws of: | | | | | | |
| IDAHO W 79747 | 6. Signature:  Name (type or print): <i>Corey J. Rippee, Attorney for Company</i> | | | | | |
| | | | | | | Date: <i>5-24-13</i> |
| | | | | | | Title: <i>Attorney for Company</i> |

Issued 05/24/2013 by DK1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM