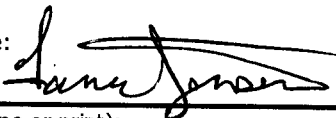


No. <b>W 47247</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/26/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> LANCE JENSEN <del>2723 SUNDANCE DR</del> <del>TWIN FALLS ID 83301</del> <b>3786 N 3381 E</b> <b>Kimberly, ID 83341</b>
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> INK TREE COMPANIES LLC LANCE JENSEN <del>647 BLUE LAKES BLVD N</del> <del>TWIN FALLS ID 83301 USA</del> <b>P.O. BOX 301</b> <b>Kimberly, Id 83341</b>		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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Lance Jensen	PO BOX 301	Kimberly,	ID		83341
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:  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 47247</b> </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;">           Signature:   <hr/>           Name (type or print):  <b>Lance Jensen</b> </div> <div style="width: 35%;">           Date:  <b>1-26-16</b>  <hr/>           Title:  <b>Owner</b> </div> </div>
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Issued 01/26/2016 by online

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM