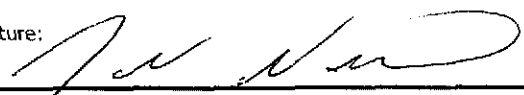


No. <b>W 109967</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 04/15/2013</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JOELLE O'CONNOR 291 SHAUN LANE KETCHUM ID 83340				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> MOUNTAIN HIGH CHRISTMAS TREES LLC JAKE NELSEN PO BOX 4605 KETCHUM ID 83340		3. <u>New</u> Registered Agent Signature.				
<b>REINSTATEMENT FEE DUE: \$30.00</b>							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
	<b>Manager or Member</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City</b>	<b>State</b>	<b>Country</b>	<b>Postal Code</b>
	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	<i>Jacob Nelsen</i>	<i>PO Box 4605 Ketchum ID</i>	<i>US</i>			<i>83340</i>
	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	<i>Joelle O'Connor</i>	<i>PO Box 183 Ketchum ID</i>	<i>US</i>			<i>83340</i>
	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	<i>Sed Rivetts</i>	<i>PO Box 183 Ketchum ID</i>	<i>US</i>			<i>83340</i>
	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of:  <b>IDAHO W 109967</b>		6. Signature:  Name (type or print): <u><i>Jacob Nelsen</i></u>		Date: <u><i>2/14/17</i></u> Title: <u><i>Manager</i></u>			
Issued 02/14/2017 by online							

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**