

<p style="font-size: 1.2em; font-weight: bold;">No. W 90341</p>	<p style="font-weight: bold;">Reinstatement Annual Report Form ADMIN DISSOLVED 05/26/2015</p>		<p>2. Registered Agent and Office (NOT A P.O. BOX) KYLE MATHIES 1680 LINDSAY BLVD IDAHO FALLS ID 83402</p>																																			
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p>	<p>1. Mailing Address: Correct in this box if needed. MULIES, LLC ANN REHNBERG 1680 LINDSAY BLVD IDAHO FALLS ID 83402 USA</p>		<p>3. <u>New</u> Registered Agent Signature.</p>																																			
<p>REINSTATEMENT FEE DUE: \$30.00</p>	<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Kyle E Mathies</td> <td>253 W 16th St</td> <td>Idaho Falls,</td> <td>ID</td> <td>Boiseville</td> <td>83402</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Kyle E Mathies	253 W 16th St	Idaho Falls,	ID	Boiseville	83402	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Kyle E Mathies	253 W 16th St	Idaho Falls,	ID	Boiseville	83402																																
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
<p>5. Organized Under the Laws of:</p> <p style="text-align: center; font-size: 1.2em; font-weight: bold;">IDAHO W 90341</p>	<p>6.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature:</td> <td style="width: 30%;">Date:</td> </tr> <tr> <td><u>Kyle E Mathies</u></td> <td><u>11-8-15</u></td> </tr> <tr> <td>Name (type or print):</td> <td>Title:</td> </tr> <tr> <td><u>Kyle E Mathies</u></td> <td><u>Manager</u></td> </tr> </table>			Signature:	Date:	<u>Kyle E Mathies</u>	<u>11-8-15</u>	Name (type or print):	Title:	<u>Kyle E Mathies</u>	<u>Manager</u>																											
Signature:	Date:																																					
<u>Kyle E Mathies</u>	<u>11-8-15</u>																																					
Name (type or print):	Title:																																					
<u>Kyle E Mathies</u>	<u>Manager</u>																																					
<p>Issued 11/09/2015 by online</p>																																						