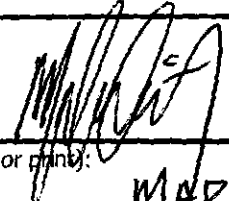


No. W 118419	Reinstatement Annual Report Form ADMIN DISSOLVED 01/16/2014		2. Registered Agent and Office (NOT A P.O. BOX) MARK WINTZ 122 S HOWARD ST 3575 Lenville Road MOSCOW ID 83843																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00			1. Mailing Address: Correct in this box if needed. 409 SOUTH JACKSON, LLC MARK WINTZ 122 S HOWARD ST 3575 Lenville Road MOSCOW ID 83843	3. <u>New</u> Registered Agent Signature.																																		
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Mark Wintz</td> <td>3575 Lenville Rd.</td> <td>MOSCOW</td> <td>ID</td> <td>US.</td> <td>83843</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 checked="" type="checkbox"/>	Mark Wintz	3575 Lenville Rd.	MOSCOW	ID	US.	83843	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 118419	6. Signature:  Name (type or print): MARK WINTZ			Date: 5/23/14 Title: Manager / Member																																		

Issued 05/23/2014 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM