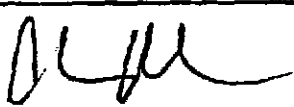


W 148780

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No. W 148780		Reinstatement Annual Report Form ADMIN DISSOLVED 06/29/2018		2. Registered Agent and Office (NOT A P.O. BOX) CHRISTOPHER D BALDWIN 218 N 2ND E MOUNTAIN HOME ID 83647																																				
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. CHRIS BALDWIN LLC CHRISTOPHER D BALDWIN 218 N 2ND E MOUNTAIN HOME ID 83647 USA		3. <u>New</u> Registered Agent Signature.																																				
REINSTATEMENT FEE DUE: \$30.00																																								
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 type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>Christopher Baldwin</td><td>3114 S Lindsay Ave</td><td>Boise</td><td>ID</td><td>83705</td><td>83705-8908 USA</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Christopher Baldwin	3114 S Lindsay Ave	Boise	ID	83705	83705-8908 USA	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 148780		6. Signature:  Date: 7-11-18 Name (type or print): Christopher Baldwin Title: Member																																						
Issued 07/11/2018 by online																																								

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Please read these instructions carefully. Pay special attention to the mailing address. If the