

No. W 87216	Reinstatement Annual Report Form ADMIN DISSOLVED 12/17/2013		2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL L NIGH <i>2903 Liteway</i> <i>Caldwell ID</i> <i>83605</i>																																				
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. SPUDWOOD 88 LLC MICHAEL L NIGH <i>2903 Liteway</i> <i>Caldwell ID</i> <i>83605</i>		3. <u>New</u> Registered Agent Signature. X																																				
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 ☒ Member ☒</td> <td>JENNIFER WIGM</td> <td>2903 Liteway</td> <td>Caldwell</td> <td>ID</td> <td></td> <td>83605</td> </tr> <tr> <td>Manager ☒ Member ☐</td> <td>MICHAEL NIGH</td> <td>2903 Liteway</td> <td>Caldwell</td> <td>ID</td> <td></td> <td>83605</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☒	JENNIFER WIGM	2903 Liteway	Caldwell	ID		83605	Manager ☒ Member ☐	MICHAEL NIGH	2903 Liteway	Caldwell	ID		83605	Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 87216		6. Signature: <i>[Signature]</i> Name (type or print): <u>MICHAEL NIGH</u>			Date: <u>8-15-18</u> Title: <u>8/15/18</u>																																		