No. W 131425	Reinstatement Annual Report Form ADMIN DISSOLVED 02/23/2016			2. Registered Agent and Office (NOT A P.O. BOX)		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		Correct in this box if		1	EDERMAN JBICON DR 83716	
REINSTATEMENT FEE DUE: \$30.00				3. <u>New</u> Reg	istered Agent	: Signature.
4. Limited Liability Manager or Member	Companies: Enter Na	imes and Addresses Street or PO Address	-		bers. See In	structions. Postal Code
Manager Member	Ryan M. Lederman	1089 E Rubicon Dr	Boi		USA	83716
Manager ☑ Member ☐	Andrew C. Lederman	1361 E Pineridge Dr	Boi	ise ID	USA	83716
Manager ☑ Member ☐	Harold Z. Lederman	1 Spinnaker #15	Marina Del	Rey CA	USA	90292
Manager Member						
5. Organized Under the La IDAHO W 131425	Signature: Name (type or	print):			Date: 30 Title:	MARCH ZOLO