

**FILED EFFECTIVE**

Base Filing fee: \$30.00.

**Complete and submit the application in duplicate.**

2016 OCT 18 AM 8:51

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:  
Revive Marriage Retreats LLC
2. The date the certificate of organization was originally filed : 19 April 2006
3. The name of the limited liability company is amended to:  
Revive Retreats LLC
4. The complete street and mailing addresses of the principal office is amended to:  
2717 N. Maple Grove, Boise ID 83704  
(Street Address)  
\_\_\_\_\_  
(Mailing Address, if different)
5. The mailing address for future correspondence (annual reports) is amended to:  
2717 N. Maple Grove, Boise ID 83704  
(Address)
6. The name and address of the managers/members shall be amended as follows:
- |  |                                  |                       |                            |
|--|----------------------------------|-----------------------|----------------------------|
| Add: <input checked="" type="checkbox"/> | Delete: <input type="checkbox"/> | <u>Mike Porter</u>    | <u>2717 N. Maple Grove</u> |
|  |                                  | <small>(Name)</small> | <small>(Address)</small>   |
| Add: <input checked="" type="checkbox"/> | Delete: <input type="checkbox"/> | <u>Amber Porter</u>   | <u>2717 N. Maple Grove</u> |
|  |                                  | <small>(Name)</small> | <small>(Address)</small>   |
| Add: <input type="checkbox"/>            | Delete: <input type="checkbox"/> | _____                 | _____                      |
|  |                                  | <small>(Name)</small> | <small>(Address)</small>   |
7. Signature of a manager, member, or authorized person. \_\_\_\_\_  
Secretary of State

Printed Name: Mike Porter

Signature:

Printed Name: Amber Porter

Secretary of State use only

IDAHO SECRETARY OF STATE

10/18/2016 05:00

CK:148 CT:330218 BH:1551294

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