


| No. W 43979 | Reinstatement Annual Report Form ADMIN DISSOLVED 01/14/2013 | | 2. Registered Agent and Office (NOT A P.O. BOX) LEE JONES 9098 LIBERTY LANE MELBA ID 83641 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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. YHT LIMITED LIABILITY COMPANY LEE JONES 9098 LIBERTY LANE MELBA ID 83641 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REINSTATEMENT FEE DUE: \$30.00 | | | 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 type="checkbox"/></td><td>Lee Jones</td><td>9098 Liberty Ln.</td><td>Melba</td><td>ID</td><td>USA</td><td>83641</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 type="checkbox"/> | Lee Jones | 9098 Liberty Ln. | Melba | ID | USA | 83641 | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Lee Jones | 9098 Liberty Ln. | Melba | ID | USA | 83641 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO W 43979 | | 6. Signature:  Date: 8-8-13 Name (type or print): Lee Jones Title: Member | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issued 08/08/2013 by DK1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |