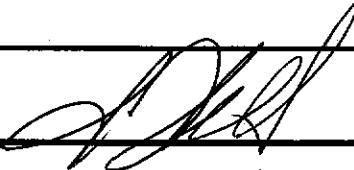
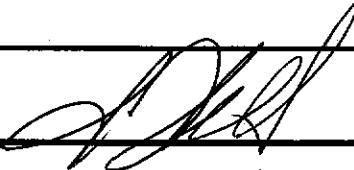
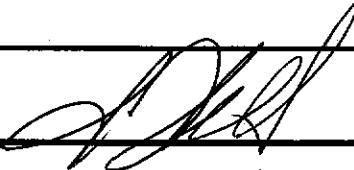


No. W 21199	Reinstatement Annual Report Form ADMIN DISSOLVED 01/06/2011		2. Registered Agent and Office (NOT A P.O. BOX) JACK WEBB 368 WHISPERING PINES LN.#5 COEUR D'ALENE ID 83815
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. WILLOW ROCK, LIMITED LIABILITY COMPANY JACK WEBB 368 WHISPERING PINES LN #5 COEUR D'ALENE ID 83815		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager ☒ Member ☐ (circle one)	JACK WEBB	1005 N WRIGHT BLVD.	LIBERTY LAKE WA.			99019

5. Organized Under the Laws of: IDAHO W 21199	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"> Signature:  </td> <td style="width: 20%;"> Date: 7/12/11 </td> </tr> <tr> <td> Name (type or print): JACK WEBB </td> <td> Title: MANAGING MEMBER </td> </tr> </table>	Signature: 	Date: 7/12/11	Name (type or print): JACK WEBB	Title: MANAGING MEMBER
Signature: 	Date: 7/12/11				
Name (type or print): JACK WEBB	Title: MANAGING MEMBER				

Issued 06/28/2011 by KAH