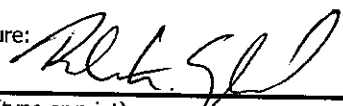


No. W 42152	Reinstatement Annual Report Form ADMIN DISSOLVED 11/14/2012		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT W GINKEL 5181 E BRANCHWOOD DR BOISE ID 83716
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BSR VENTURES, LLC 5181 E BRANCHWOOD DR BOISE ID 83716		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 <input type="checkbox"/> Member <input checked="" type="checkbox"/> <u>ROBERT GINKEL - 5181 E. BRANCHWOOD DR, BOISE, ID, USA</u> <u>83716</u>			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <u>TONIA GINKEL - (same)</u>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 42152 </div>		6. Signature: <u></u> Date: <u>11/19/12</u> Name (type or print): <u>ROBERT W. GINKEL</u> Title: <u>member</u>	
Issued 11/19/2012 by DK1			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM