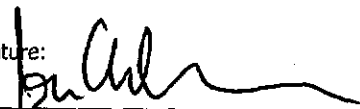


No. <b>W 54177</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 12/09/2011</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JON ANDERSON <del>5705 W PARAPET CT</del> <b>930 N Cole Rd</b> <del>BOISE ID 83703</del> <b>Boise, ID 83704</b>
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> VI360 OF IDAHO LLC JON ANDERSON <del>5705 W PARAPET CT</del> <b>930 N Cole Rd</b> <del>BOISE ID 83703</del> <b>Boise, ID 83704</b>		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"/>	JOHN ANDERSON	5705 W PARAPET CT	ID			83703
Manager <input type="checkbox"/> Member <input type="checkbox"/>		Boise				
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;"> <b>IDAHO</b>  <b>W 54177</b> </div>	6. Signature:  <hr/> Name (type or print): <b>Jon ANDERSON</b>	Date: <b>6/4/2012</b> <hr/> Title: <b>President</b>
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Issued 05/18/2012 by SLD

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM