No. W 50014	Reinstatement Annual Report Form ADMIN DISSOLVED 07/08/2010	2. Registered Agent and Office (NOT A P.O. BOX)
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. VICTOR TOWNHOUSES LLC ~~TRAVIS THOMPSON~~ 2345 N Woodruff Ave ~~PO BOX 408~~ ~~VICTOR ID 83455~~ Idaho Falls, ID 83401	~~TRAVIS THOMPSON~~ K. Jayce Howell ~~20 CEDRON RD~~ 2345 N Woodruff Ave ~~VICTOR ID 83455~~ Idaho Falls, ID 83401
REINSTATEMENT FEE DUE: $30.00		3. New 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 ☑	K. Jayce Howell	41653 E Ionard.	IdahoFalls	ID	Bonneville	83401
Manager ☐ Member ☐						
Manager ☐ Member ☐						
Manager ☐ Member ☐						

5. Organized Under the Laws of:	6. Signature:	Date:
IDAHO W 50014	Name (type or print): K. Jayce Howell	Title: Member

Issued 12/10/2012 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM