

<p><b>No. W 128287</b></p>	<p><b>Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014</b></p>		<p><b>2. Registered Agent and Office (NOT A P.O. BOX)</b> BOBBIE JO MULLINS <del>485 N 2ND E STE 264</del> REXBURG ID 83440 <i>1440 Lindsay Blvd Idahofalls ID 83402</i></p>																																			
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p>	<p><b>1. Mailing Address: Correct in this box if needed.</b> BLACK MAGIC ASPHALT L.L.C BOBBIE JO MULLINS <del>485 N 2ND E STE 264</del> <i>2184 Channing way</i> <del>REXBURG ID 83440</del> <i>Ste 297 Idahofalls</i> <i>ID 83404</i></p>		<p><b>3. <u>New</u> Registered Agent Signature.</b></p>																																			
<p><b>REINSTATEMENT FEE DUE: \$30.00</b></p>																																						
<p><b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b></p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Manager or Member</th> <th style="width:20%;">Name</th> <th style="width:30%;">Street or PO Address</th> <th style="width:10%;">City</th> <th style="width:10%;">State</th> <th style="width:10%;">Country</th> <th style="width:15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td><i>Bobbie mullins</i></td> <td><i>2184 Channing way</i></td> <td><i>Idahofalls</i></td> <td><i>ID</i></td> <td></td> <td><i>83404</i></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"/>	<i>Bobbie mullins</i>	<i>2184 Channing way</i>	<i>Idahofalls</i>	<i>ID</i>		<i>83404</i>	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p><b>5. Organized Under the Laws of:</b></p> <p style="text-align: center;"><b>IDAHO W 128287</b></p>	<p><b>6.</b></p> <p>Signature: <u><i>Bobbie Mullins</i></u></p> <p>Name (type or print): <u><i>Bobbie Jo mullins</i></u></p>			<p>Date: <u><i>8-16-16</i></u></p> <p>Title: <u><i>manager</i></u></p>																																		
<p>Issued 08/16/2016 by online</p>																																						