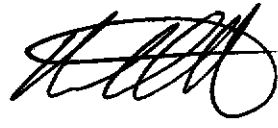





No. <b>W 52827</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 10/10/2007</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  USTICK CONVENIENCE STORE, LLC ROBERT W MONTGOMERY <del>5120 W OVERLAND RD PMB 234</del> <del>BOISE ID 83705</del> 6126 W. State St., Ste. 100 Boise, Idaho 83703	<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> <del>TAMARA HASKINS</del> Kevin Sackett <del>5730 W AMBITION CT</del> <del>BOISE ID 83705</del> 6126 W. State St., Ste. 100 Boise, ID 83703  <b>3. New Registered Agent Signature.</b> 														
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office Held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Robert Montgomery</td> <td>3271 Beach Club Road</td> <td>Carpinteria</td> <td>CA</td> <td></td> <td>93013</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Manager	Robert Montgomery	3271 Beach Club Road	Carpinteria	CA		93013
Office Held	Name	Street or PO Address	City	State	Country	Postal Code										
Manager	Robert Montgomery	3271 Beach Club Road	Carpinteria	CA		93013										
<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO W 52827</b> </div>	<b>6.</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"> <b>Signature:</b>  </td> <td style="width: 30%;"> <b>Date:</b> 10/22/10         </td> </tr> <tr> <td> <b>Name (type or print):</b> Robert Montgomery         </td> <td> <b>Title:</b> Manager         </td> </tr> </table>		<b>Signature:</b> 	<b>Date:</b> 10/22/10	<b>Name (type or print):</b> Robert Montgomery	<b>Title:</b> Manager										
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Issued 10/14/2010 by JL1																

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.  
**Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

**Block 3:** Only a new registered agent must sign in Block 3.

**Block 4:** Enter names and business addresses of management. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.