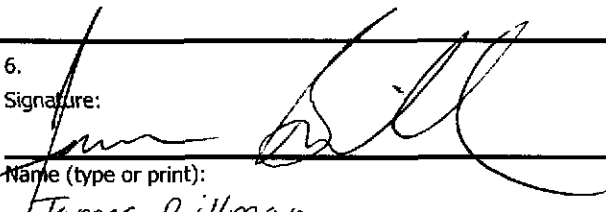


No. W 149917	Reinstatement Annual Report Form ADMIN DISSOLVED 07/23/2018		2. Registered Agent and Office (NOT A P.O. BOX) JAMES BILLMAN 3910 S YELLOWSTONE STE 105 IDAHO FALLS ID 83402
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BILLMAN REALTY LLC JAMES BILLMAN 3910 S YELLOWSTONE STE 105 IDAHO FALLS ID 83402		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 checked="" type="checkbox"/> Member <input type="checkbox"/> <i>James Billman</i> <i>5676 E Sagewood Dr,</i> <i>Idaho Falls,</i> <i>ID</i> <i>83406</i> <i>USA</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"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 149917 </div>		6. Signature:  <hr/> Name (type or print): <i>James Billman</i> <hr/> <div style="display: flex; justify-content: space-between;"> <div> Date: <i>09/10/2018</i> <hr/> Title: <i>Owner</i> <hr/> </div> </div>	