

No. <b>W 44436</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 02/27/2018</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> SEAN MOULTON 60 E WALLACE AVE DRIGGS ID 83422-8910																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. RJJ RIVER RIM, LLC RONALD J JUDY <del>3565 LAS VEGAS BLVD S #705 LAS VEGAS NV 89109-8919</del> 1350 E. Flamingo Rd. # 707 Las Vegas, NV 89119		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>RJJ Partners, LP</td> <td>1350 E. Flamingo Rd # 707</td> <td>Las Vegas,</td> <td>NV</td> <td></td> <td>89119</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	RJJ Partners, LP	1350 E. Flamingo Rd # 707	Las Vegas,	NV		89119	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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5. Organized Under the Laws of:  <b>IDAHO W 44436</b>	6. Signature:  Date: 7-18-18 Name (type or print): Ronald J. Judy Title: Mgr. of GP. for Member																																					

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### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the