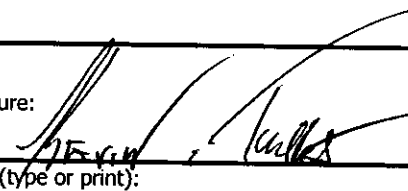


No. W 95444	Reinstatement Annual Report Form ADMIN DISSOLVED 11/14/2012		2. Registered Agent and Office (NOT A P.O. BOX) JEFFREY STEVENSON 8314 W PAMELA ST BOISE ID 83714																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. SABRE ENTERPRISES, LLC JEFFREY STEVENSON 8314 W PAMELA ST BOISE ID 83714																																					
REINSTATEMENT FEE DUE: \$30.00			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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>KEVIN S. TRICKETT</td> <td>2603 E Romco DR.</td> <td>MERIDIAN</td> <td>ID</td> <td></td> <td>83642</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Jeffrey STEVENSON</td> <td>8314 W. PAMELA ST.</td> <td>BOISE</td> <td>ID</td> <td></td> <td>83714</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"/>	KEVIN S. TRICKETT	2603 E Romco DR.	MERIDIAN	ID		83642	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Jeffrey STEVENSON	8314 W. PAMELA ST.	BOISE	ID		83714	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: IDAHO W 95444		6. Signature:  Date: <u>3/25/13</u> Name (type or print): <u>KEVIN S. TRICKETT</u> Title: <u>OWNER/MANAGER</u>																																				

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