

FILED EFFECTIVE**FILED EFFECTIVE**

No. W 50549	Reinstatement Annual Report Form ADMIN DISSOLVED 08/10/2011		2. Registered Agent and Office (NOT A P.O. BOX) ERIC HOCHENDONER SR 341 MELROSE ST BELLEVUE ID 83313 135 PARKER GUNCLIFF SHOSHONE, ID 83352																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83723 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. TRINITY DEVELOPERS, LLC ERIC HOCHENDONER PO BOX 967 BELLEVUE ID 83313 135 PARKER GUNCLIFF SHOSHONE, ID 83352																																					
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 ☒ Member ☒</td> <td>ERIC HOCHENDONER</td> <td>135 PARKER GUNCLIFF</td> <td>SHOSHONE</td> <td>ID</td> <td></td> <td>83352</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☒	ERIC HOCHENDONER	135 PARKER GUNCLIFF	SHOSHONE	ID		83352	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 50549		6. Signature: <u>Eric Hochendoner</u> Date: <u>4/8/14</u> Name (type or print): <u>HOCHENDONER, ERIC</u> Title: <u>MANAGER</u>																																				

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