





No. <b>W 76391</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 10/11/2013</b>		2. Registered Agent and Office (NOT A P.O. BOX) <b>Matthew Carlisle</b> <del>KIMBERLY A CARLISLE</del> 3050 MORGAN GROVE LANE MERIDIAN ID 83646																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> JARACH INVESTMENTS LLC MATTHEW S. CARLISLE 3050 MORGAN GROVE LANE MERIDIAN ID 83646		3. <b>New Registered Agent Signature.</b> 																																			
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <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>Matthew Carlisle</td> <td>3050 N. Morgan Grove</td> <td>Meridian</td> <td>ID</td> <td></td> <td>83646</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Matthew Carlisle	3050 N. Morgan Grove	Meridian	ID		83646	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Matthew Carlisle	3050 N. Morgan Grove	Meridian	ID		83646																																
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:  <b>IDAHO</b> <b>W 76391</b>		6. <table border="1"> <tr> <td>Signature: </td> <td>Date: <b>10/25/15</b></td> </tr> <tr> <td>Name (type or print): <b>Matthew Carlisle</b></td> <td>Title: <b>Manager</b></td> </tr> </table>		Signature: 	Date: <b>10/25/15</b>	Name (type or print): <b>Matthew Carlisle</b>	Title: <b>Manager</b>																															
Signature: 	Date: <b>10/25/15</b>																																					
Name (type or print): <b>Matthew Carlisle</b>	Title: <b>Manager</b>																																					

Issued 10/10/2015 by online