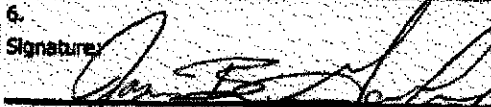


<b>No. W 180670</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 06/29/2018</b>		<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> JASON GODFREY 598 EAST DEPOT STREET WESTON ID 83286																																			
<b>Return to:</b> SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	<b>1. Mailing Address: Correct in this box if needed.</b> BRAVO INVESTMENTS, LLC JASON GODFREY 598 EAST DEPOT STREET WESTON ID 83286 <i>1632 North Main Street Suite 2C Logan, UT 84321</i>		<b>3. New Registered Agent Signature.</b>																																			
<b>4. 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>Jason Godfrey</td> <td>P.O. Box 92</td> <td>Clarkston,</td> <td>UT</td> <td>USA</td> <td>84309</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"/>	Jason Godfrey	P.O. Box 92	Clarkston,	UT	USA	84309	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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<b>5. Organized Under the Laws of:</b>  IDAHO W 180670	<b>6. Signature:</b>  <hr/> <b>Name (type or print):</b> Jason Godfrey			<b>Date:</b> 7-9-18  <b>Title:</b> Manager																																		

Issued 07/03/2018 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**