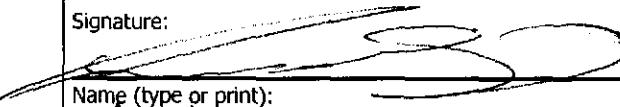


No. W 102675	Reinstatement Annual Report Form ADMIN DISSOLVED 07/10/2013		2. Registered Agent and Office (NOT A P.O. BOX) ANDREW HOREJS 337 N MILWAUKEE BOISE ID 83704 9382 Maple Hill 83709	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. CAPITAL SATELLITE LLC ANDREW HOREJS 337 N MILWAUKEE 9382 Maple Hill BOISE ID 83704 83709		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Name	Street or PO Address	City	State Country Postal Code
Manager <input type="checkbox"/> Member <input type="checkbox"/>	Andrew Horejs 9382 Maple Boise ID 83709 Hill			
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:		6.		Date:
IDAHO W 102675		Signature: 		7-20-15
Name (type or print): Andrew Horejs				Title: Member
Issued 07/20/2015 by JL1				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Enter the name of the company and answer the questions in this form. Pay special attention to the mailing address. If the