

FILED EFFECTIVE

No. W 58591	Reinstatement Annual Report Form ADMIN DISSOLVED 04/15/2013		2. Registered Agent and Office (NOT A P.O. BOX)																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. PROSPECT VENTURES LLC LANE T HANSON 1092 ARTIC WILLOW DR REXBURG ID 83440		LANE T HANSON 100 W 1ST S REXBURG ID 83440 1092 ARTIC WILLOW DR. REXBURG, ID 83440 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 ☒ Member ☐</td> <td>LANE T. HANSON</td> <td>1092 ARTIC WILLOW DR.</td> <td>REXBURG</td> <td>ID</td> <td>USA</td> <td>83440</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 ☐	LANE T. HANSON	1092 ARTIC WILLOW DR.	REXBURG	ID	USA	83440	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 58591		6. Signature:  Date: <u>5-2-14</u> Name (type or print): <u>LANE T. HANSON</u> Title: <u>MANAGER</u>																																				

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