

-EXP-
208-334-2080

No. W 43972	Reinstatement Annual Report Form ADMIN DISSOLVED 01/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT S ASHBY 3033 MAGNOLIA #201 LEWISTON ID 83501																					
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. RSA ENTERPRISES, LLC PO BOX 1817 LEWISTON ID 83501		3. New Registered Agent Signature.																					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</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>member</td> <td>Robert S. Ashby</td> <td>P.O. Box 1817</td> <td>Lewiston</td> <td>ID</td> <td>USA</td> <td>83501</td> </tr> <tr> <td>member</td> <td>Robert J. Ashby</td> <td>1120 Vantage Dr</td> <td>La Habra</td> <td>CA</td> <td></td> <td>90631</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	member	Robert S. Ashby	P.O. Box 1817	Lewiston	ID	USA	83501	member	Robert J. Ashby	1120 Vantage Dr	La Habra	CA		90631
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5. Organized Under the Laws of: IDAHO W 43972		6. Signature: <u><i>Robert S. Ashby</i></u> Date: <u>8-4-10</u> Name (type or print): <u>Robert S. Ashby</u> Title: <u>Member</u>																						
Issued 06/04/2010 by DK1																								