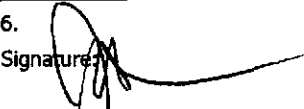


No. W 38258 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 07/21/2015 1. Mailing Address: Correct in this box if needed. JLC HOLDINGS, LLC LAURA M GRABOW PO BOX 6880 KETCHUM ID 83340 USA	2. Registered Agent and Office (NOT A P.O. BOX) JOHN C GRABOW 521 JUNIPER ROAD SUN VALLEY ID 83353 3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 5%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>John Grabow</td> <td>PO Box 6880</td> <td>Ketchum</td> <td>ID</td> <td>USA</td> <td>83340</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Laura Grabow</td> <td>PO Box 6880</td> <td>Ketchum</td> <td>ID</td> <td>USA</td> <td>83340</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>				Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	John Grabow	PO Box 6880	Ketchum	ID	USA	83340	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Laura Grabow	PO Box 6880	Ketchum	ID	USA	83340	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
	Name	Street or PO Address	City	State	Country	Postal Code																															
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	John Grabow	PO Box 6880	Ketchum	ID	USA	83340																															
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Laura Grabow	PO Box 6880	Ketchum	ID	USA	83340																															
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																					
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																					
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;">IDAHO W 38258</div>	6. <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Signature:  <hr/> Name (type or print): John C. Grabow </div> <div style="width: 35%;"> Date: 7/29/15 <hr/> Title: Managing Member </div> </div>																																				
Issued 07/27/2015 by online																																					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM