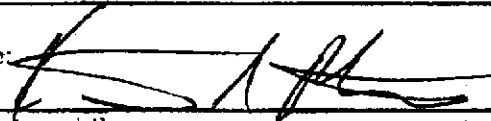


No. <b>W 163861</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/28/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> <b>KEITH MOLLER</b> <b>3637 N 3500 E</b> <b>KIMBERLY ID 83341</b>																																			
Return to: <b>SECRETARY OF STATE</b> <b>450 N 4th STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>  <b>REINSTATEMENT FEE</b> <b>due: \$30.00</b>	1. Mailing Address: Correct in this box if needed. <b>MOLLER CONSTRUCTION &amp; SONS LLC</b> <b>KEITH MOLLER</b> <b>3637 N 3500 E</b> <b>KIMBERLY ID 83341</b>																																					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions. <table border="0"><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 checked="" type="checkbox"/></td><td><b>KEITH MOLLER</b></td><td><b>3637 N 3500 E</b></td><td><b>KIMBERLY</b></td><td><b>ID.</b></td><td><b>TWIN FALLS</b></td><td><b>COO</b></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td><b>83341</b></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 checked="" type="checkbox"/>	<b>KEITH MOLLER</b>	<b>3637 N 3500 E</b>	<b>KIMBERLY</b>	<b>ID.</b>	<b>TWIN FALLS</b>	<b>COO</b>	Manager <input type="checkbox"/> Member <input type="checkbox"/>						<b>83341</b>	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							3. New Registered Agent Signature.
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 163861</b>	6. Signature:  Name (type or print): <b>KEITH A MOLLER</b>			Date: <b>7-5-17</b> <b>MEMBER/OWNER</b> Title: <b>OWNER</b> <b>MEMBER</b>																																		