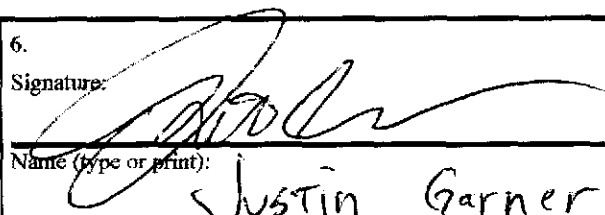


FILED

| No. W 53869 | | Reinstatement Annual Report Form ADMIN DISSOLVED 11/30/2017 | | 2. Registered Agent and Office (NOT A P.O. BOX) JUSTIN GARNER 446 COMMANCHE REXBURG ID 83440 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------|---|---------|--|---------|-------------------|------|----------------------|------|-------|---------|-------------|---|---------------|------------------------|---------|----|--|-------|---|--------------|------------------------|---------|----|--|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 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. GARNSTAR, LLC JUSTIN GARNER 446 COMMANCHE DR REXBURG ID 83440 <i>1117 Coyote Willow way Rexburg ID 83440</i> | | 3. <u>New</u> Registered Agent Signature. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REINSTATEMENT FEE DUE: \$30.00 | | 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 <input checked="" type="checkbox"/> Member <input type="checkbox"/></td><td>Justin Garner</td><td>1117 Coyote Willow way</td><td>Rexburg</td><td>ID</td><td></td><td>83440</td></tr><tr><td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td><td>Megan Garner</td><td>1117 Coyote Willow way</td><td>Rexburg</td><td>ID</td><td></td><td>83440</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 type="checkbox"/> | Justin Garner | 1117 Coyote Willow way | Rexburg | ID | | 83440 | Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Megan Garner | 1117 Coyote Willow way | Rexburg | ID | | 83440 | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Justin Garner | 1117 Coyote Willow way | Rexburg | ID | | 83440 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Megan Garner | 1117 Coyote Willow way | Rexburg | ID | | 83440 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO W 53869 | | 6. Signature:  Name (type or print): <u>Justin Garner</u> Date: <u>12/15/17</u> Title: <u>Manager</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issued 12/20/2017 by online | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |