No. W 93861	Reinstatement Annual Report Form ADMIN DISSOLVED 10/04/2016	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	1. Mailing Address: Correct in this box if needed.  MOSAIC ADVISORS, LLC  ADREAN CAVENER  1048 W STATE ST 836 E. FOREST PACECT.  MERIDIAN ID 83642	ADREAN CASPER  1048 W STATE ST 836 E. FOREST  MERIDIAN ID 83642 RIDGE CT.
REINSTATEMENT FEE DUE: \$30.00		3. <u>New</u> Registered Agent Signature.
Manager or Member	Companies: Enter Names and Addresses of Manager  Name Street or PO Address City  ADREAN CAVENER 836. E. FOREST RIDGE CT. 1	State Country Postal Code
5. Organized Under the Law IDAHO W 93861 Issued 07/24/2017 by JL1	No of: 6. Signature:  Allen anerer Name (type or print):  ADREAM CAVENER	Date: / 7/24/2017 Title: MANASEM