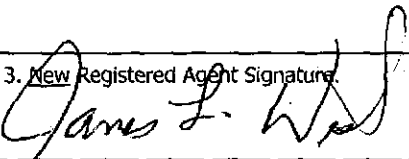
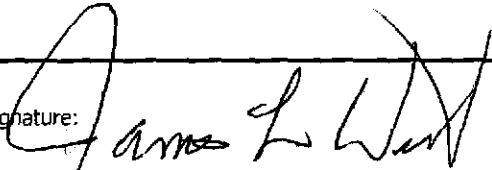


No. W 101136	Reinstatement Annual Report Form ADMIN DISSOLVED 06/29/2018		2. Registered Agent and Office (NOT A P.O. BOX) JAMES WELLS 790 E 3800 N BUHL ID 83316
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. RAFTER J GRAZING ASSOCIATION, LLC JAMES WELLS 790 E 3800 N BUHL ID 83316		3. New Registered Agent Signature 
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	James Wells 790 E 3800 N Buhl Id THALLS 83316		
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Ruth Wells " " " " "		
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: large;"> IDAHO W 101136 </div>		6. Signature:  <hr/> Name (type or print): <u>James L. Wells</u> <hr/> <div style="display: flex; justify-content: space-between;"> <div> Date: <u>7/20/18</u> <hr/> Title: <u>Manager</u> </div> </div>	
Issued 07/12/2018 by JLL			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM