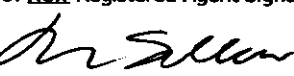



**FILED EFFECTIVE**

No. <b>W 108314</b>	<b>Reinstatement Annual Report Form</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> )																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> TEREDO ENERGY TRANSPORTATION LLC 2238 W LOS FLORES DR MERIDIAN ID 83646		LANCE MANNING <del>823 E THUNDERBIRD CT</del> EAGLE ID 83616 JASON SWALLOW 2238 W. LOS FLORES DR MERIDIAN, ID 83646  3. <b>New</b> Registered Agent Signature. 																																			
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>JASON SWALLOW</td> <td>2238 LOS FLORES DR</td> <td>MERIDIAN</td> <td>ID</td> <td>USA</td> <td>83646</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>SCOTT LAING</td> <td>3295 W. GRAND RAPIDS DR</td> <td>MERIDIAN</td> <td>ID</td> <td>USA</td> <td>83646</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>GREGORY MOWER</td> <td>2405 E DEER POINT CT</td> <td>EAGLE</td> <td>ID</td> <td>USA</td> <td>83616</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>LANCE MANNING</td> <td>4224 E CARBON ST.</td> <td>EAGLE</td> <td>ID</td> <td>USA</td> <td>83616</td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	JASON SWALLOW	2238 LOS FLORES DR	MERIDIAN	ID	USA	83646	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	SCOTT LAING	3295 W. GRAND RAPIDS DR	MERIDIAN	ID	USA	83646	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	GREGORY MOWER	2405 E DEER POINT CT	EAGLE	ID	USA	83616	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	LANCE MANNING	4224 E CARBON ST.	EAGLE	ID	USA	83616
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5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 108314</b>		6. Signature:  Date: <u>2-20-14</u> Name (type or print): <u>JASON SWALLOW</u> Title: <u>MEMBER</u>																																				

Issued 02/20/2014 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**

**Block 3:** Only a **new** registered agent must sign in Block 3.

**Block 4:** Check either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note: DO NOT** put "same as last year" or "same as above". **These will not be accepted. Changes here will not affect the address in Block 1.** If more space is needed please add an attachment.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.

**\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the limited liability company is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at [www.sos.idaho.gov](http://www.sos.idaho.gov). However, if no timely annual report is filed, administrative action will be taken, at no cost to the limited liability company to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? \_\_\_\_\_