

FILED EFFECTIVE

No. W 109565	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2013		2. Registered Agent and Office (NOT A P.O. BOX) BERT DEWINKLE 9920 MELMONT RD 3438 Lynwood MELBA ID 83641																																										
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. PROVIDENCE LAND, LLC BERT DEWINKLE 9920 MELMONT RD 3438 Lynwood Rd. MELBA ID 83641 → correct		3. New Registered Agent Signature.																																										
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 ☐ Member ☒</td> <td>Bert DeWinkle</td> <td>3438 Lynwood</td> <td>Melba</td> <td>ID</td> <td>USA</td> <td>83641</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Tryntje</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Rudi DeWinkle</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>☒</td> <td>Peter</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Siska Reece</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 ☐ Member ☒	Bert DeWinkle	3438 Lynwood	Melba	ID	USA	83641	Manager ☐ Member ☒	Tryntje	"	"	"	"	"	Manager ☐ Member ☒	Rudi DeWinkle	"	"	"	"	"	☒	Peter	"	"	"	"	"	Manager ☐ Member ☒	Siska Reece	"	"	"	"	"
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5. Organized Under the Laws of: IDAHO W 109565		6. Signature: <u>Siska Reece</u> Date: <u>3/19/13</u> Name (type or print): <u>Siska Reece</u> Title: <u>Bookkeeper</u>																																											

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