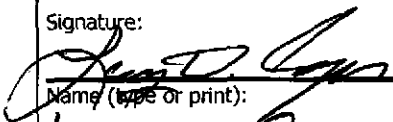
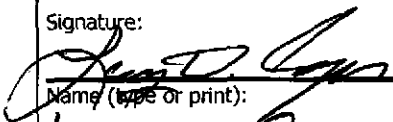
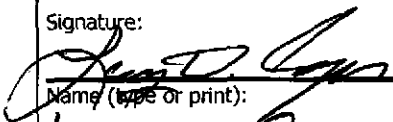


No. W 80237	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2013		2. Registered Agent and Office (NOT A P.O. BOX) LARRY D CONGER 18045 ANGELINA CT CALDWELL ID 83607
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CAMAS CREEK CONSTRUCTION, LLC LARRY D CONGER 18045 ANGELINA CT CALDWELL ID 83607 USA		3. <u>New</u> 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"/>	Larry Conger	18045 Angelina Ct.	Caldwell	ID	Canyon	83607
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Christy Conger	18045 Angelina Ct.	Caldwell	ID	Canyon	83607
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;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 80237</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  Name (type or print): <u>Larry D. Conger</u> </td> <td style="width: 40%;"> Date: <u>4/4/14</u> Title: <u>Manager</u> </td> </tr> </table>	Signature:  Name (type or print): <u>Larry D. Conger</u>	Date: <u>4/4/14</u> Title: <u>Manager</u>
Signature:  Name (type or print): <u>Larry D. Conger</u>	Date: <u>4/4/14</u> Title: <u>Manager</u>		

Issued 04/04/2014 by JL1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM