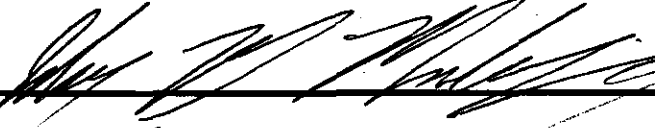


No. W 87980	Reinstatement Annual Report Form ADMIN DISSOLVED 01/06/2011		2. Registered Agent and Office (NOT A P.O. BOX) JOSHUA MANLEY 4847 W TALAMORE DR MERIDIAN ID 83646															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. JB MANLEY LLC JOSHUA MANLEY 4847 W TALAMORE DR MERIDIAN ID 83646 <i>TM</i> <i>443 Flynn Ln</i> <i>Mccall ID 83638</i> <i>1300 North</i> <i>Po Box 453</i> <i>Riggins, ID 83549</i>		3. New Registered Agent Signature.															
	4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.																	
<table border="1"><thead><tr><th>Manager/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></td><td>Joshua B. Manley</td><td>443 Flynn Ln 1300 North Po Box 453</td><td>Mccall Riggins Id</td><td>ID Id</td><td></td><td>83638 83549</td></tr></tbody></table>					Manager/Member	Name	Street or PO Address	City	State	Country	Postal Code		Joshua B. Manley	443 Flynn Ln 1300 North Po Box 453	Mccall Riggins Id	ID Id		83638 83549
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	Joshua B. Manley	443 Flynn Ln 1300 North Po Box 453	Mccall Riggins Id	ID Id		83638 83549												
5. Organized Under the Laws of: IDAHO W 87980	6. Signature:  Date: <u>4/11/11</u> Name (type or print): <u>Joshua B. Manley</u> Title: <u>owner/manager</u>																	