

ID - SOS

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Fax Server

| <b>No. W 83087</b><br>Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT FEE<br/>         DUE: \$30.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                         | <b>Reinstatement Annual Report Form<br/>         ADMIN DISSOLVED 07/12/2011</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>PURE FOREST LLC<br>OWEN WADSWORTH<br>70 EAST 2125 SOUTH<br>OAKLEY ID 83346 |               | <b>2. Registered Agent and Office<br/>         (NOT A P.O. BOX)</b><br>WILLIAM H HURST<br>407 S 9TH AVE<br>CALDWELL ID 83605<br><br><b>3. New Registered Agent Signature.</b><br> |         |                   |      |                      |      |       |         |             |                                                                             |                |            |        |    |  |       |                                                                             |                         |                     |               |           |    |       |                                                                  |  |  |  |  |  |  |                                                                  |  |  |  |  |  |  |
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| <b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions.</b><br><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>OWEN WADSWORTH</td> <td>70E 2125 S</td> <td>OAKLEY</td> <td>ID</td> <td></td> <td>83346</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>TRUSTEN BRUCE WADSWORTH</td> <td>6411 TANAGER CIRCLE</td> <td>GARDEN VALLEY</td> <td>EL DORADO</td> <td>CA</td> <td>95633</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></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 <input type="checkbox"/> Member <input checked="" type="checkbox"/> | OWEN WADSWORTH | 70E 2125 S | OAKLEY | ID |  | 83346 | Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> | TRUSTEN BRUCE WADSWORTH | 6411 TANAGER CIRCLE | GARDEN VALLEY | EL DORADO | CA | 95633 | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  |
| Manager or Member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Name                    | Street or PO Address                                                                                                                                                                                                           | City          | State                                                                                                                                                                                                                                                               | Country | Postal Code       |      |                      |      |       |         |             |                                                                             |                |            |        |    |  |       |                                                                             |                         |                     |               |           |    |       |                                                                  |  |  |  |  |  |  |                                                                  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | OWEN WADSWORTH          | 70E 2125 S                                                                                                                                                                                                                     | OAKLEY        | ID                                                                                                                                                                                                                                                                  |         | 83346             |      |                      |      |       |         |             |                                                                             |                |            |        |    |  |       |                                                                             |                         |                     |               |           |    |       |                                                                  |  |  |  |  |  |  |                                                                  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | TRUSTEN BRUCE WADSWORTH | 6411 TANAGER CIRCLE                                                                                                                                                                                                            | GARDEN VALLEY | EL DORADO                                                                                                                                                                                                                                                           | CA      | 95633             |      |                      |      |       |         |             |                                                                             |                |            |        |    |  |       |                                                                             |                         |                     |               |           |    |       |                                                                  |  |  |  |  |  |  |                                                                  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                         |                                                                                                                                                                                                                                |               |                                                                                                                                                                                                                                                                     |         |                   |      |                      |      |       |         |             |                                                                             |                |            |        |    |  |       |                                                                             |                         |                     |               |           |    |       |                                                                  |  |  |  |  |  |  |                                                                  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                         |                                                                                                                                                                                                                                |               |                                                                                                                                                                                                                                                                     |         |                   |      |                      |      |       |         |             |                                                                             |                |            |        |    |  |       |                                                                             |                         |                     |               |           |    |       |                                                                  |  |  |  |  |  |  |                                                                  |  |  |  |  |  |  |
| <b>5. Organized Under the Laws of:</b><br><br><b>IDAHO</b><br><b>W 83087</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                         | <b>6.</b><br>Signature: <br>Name (type or print): <u>Owen Wadsworth</u><br>Date: <u>5/24/2012</u><br>Title: <u>MEMBER</u>                   |               |                                                                                                                                                                                                                                                                     |         |                   |      |                      |      |       |         |             |                                                                             |                |            |        |    |  |       |                                                                             |                         |                     |               |           |    |       |                                                                  |  |  |  |  |  |  |                                                                  |  |  |  |  |  |  |

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**