




FILED EFFECTIVE

| No. W 50566 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00 | Reinstatement Annual Report Form ADMIN DISSOLVED 08/07/2008 1. Mailing Address: Correct in this box if needed. CAMCO LLC. 7819 W PREECE DR BOISE ID 83704 | 2. Registered Agent and Office (NOT A P.O. BOX) CAMERON MCFADDAN 7819 W PREECE DR BOISE ID 83704 3. New Registered Agent Signature. | | | | | | | | | | | | | | |
|---|--|---|--|----------------|--|---------------|-------|---------|-------------|--------|------------------|----------------|-------|----|-----|-------|
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office Held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>Cameron McFadden</td> <td>7819 W. Preece</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83704</td> </tr> </tbody> </table> | | | Office Held | Name | Street or PO Address | City | State | Country | Postal Code | Member | Cameron McFadden | 7819 W. Preece | Boise | ID | USA | 83704 |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | |
| Member | Cameron McFadden | 7819 W. Preece | Boise | ID | USA | 83704 | | | | | | | | | | |
| 5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 50566 </div> | 6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: </td> <td style="width: 40%;">Date: 10/24/09</td> </tr> <tr> <td>Name (type or print): Cameron McFadden</td> <td>Title: Member</td> </tr> </table> | | Signature:  | Date: 10/24/09 | Name (type or print): Cameron McFadden | Title: Member | | | | | | | | | | |
| Signature:  | Date: 10/24/09 | | | | | | | | | | | | | | | |
| Name (type or print): Cameron McFadden | Title: Member | | | | | | | | | | | | | | | |
| Issued 10/05/2009 by SL1 | | | | | | | | | | | | | | | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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: Enter names and business addresses of management. **Note:** **Do not** put "same as last year" or "same as above". **These will not be accepted.**

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.