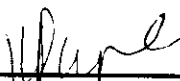
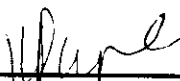
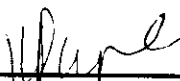


No. W 128421	Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014		2. Registered Agent and Office (NOT A P.O. BOX) KRISTA LOUISE PAPE 2237 N BROADVIEW PL BOISE ID 83702 447 W. Myrtle St.
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. DIAMONDS IN THE ROUGH LLC 2237 N BROADVIEW PL 447 W. Myrtle St. BOISE ID 83702		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"/>	Krista L. Pape	Boise ID USA	83702			
	447 W. Myrtle St.					
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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;"> IDAHO W 128421 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: 2/28/2015 </td> </tr> <tr> <td> Name (type or print): Krista Louise Pape </td> <td> Title: member </td> </tr> </table>	Signature: 	Date: 2/28/2015	Name (type or print): Krista Louise Pape	Title: member
Signature: 	Date: 2/28/2015				
Name (type or print): Krista Louise Pape	Title: member				

Issued 02/28/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM