




No. W 36629 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 05/05/2006 1. Mailing Address: Correct in this box if needed. SCENIC WEST PROPERTIES, LLC D JARED JENSEN 205 HARRISBURG LN 601 Gatehouse Lane IDAHO FALLS ID 83404	2. Registered Agent and Office (NOT A P.O. BOX) D JARED JENSEN 205 HARRISBURG LN IDAHO FALLS ID 83404 601 Gatehouse Lane 3. New Registered Agent Signature.														
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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><input checked="" type="radio"/> Manager <input type="radio"/> Member (circle one)</td><td>Jared Jensen</td><td>601 Gatehouse Ln</td><td>Idaho Falls</td><td>ID</td><td>USA</td><td>83404</td></tr></tbody></table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	<input checked="" type="radio"/> Manager <input type="radio"/> Member (circle one)	Jared Jensen	601 Gatehouse Ln	Idaho Falls	ID	USA	83404
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code										
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5. Organized Under the Laws of: IDAHO W 36629	6. <table><tr><td>Signature: </td><td>Date: 3/18/2012</td></tr><tr><td>Name (type or print): D. Jared Jensen</td><td>Title: Manager</td></tr></table>		Signature: 	Date: 3/18/2012	Name (type or print): D. Jared Jensen	Title: Manager										
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Issued 02/15/2012 by PEH																