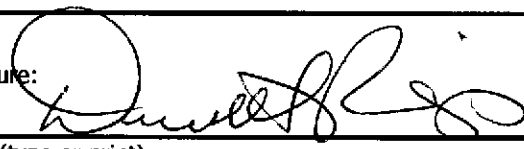


No. W 119437	Reinstatement Annual Report Form ADMIN DISSOLVED 02/27/2018		2. Registered Agent and Office (NOT A P.O. BOX) JON D HILL 339 W STATE ST STE 205 EAGLE ID 83616																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. IJUMP KENNEWICK, LLC DUANE H RIGGS 2101 N CORSEY WAY EAGLE ID 83616		3. <u>New</u> Registered Agent Signature.																																			
REINSTATEMENT FEE DUE: \$30.00																																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 15%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Duane Riggs</td> <td>2101 N. Corsey</td> <td>Eagle, ID</td> <td>ADA</td> <td></td> <td>83616</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Colleen Riggs</td> <td>2101 N. Corsey</td> <td>Eagle, ID</td> <td>83616</td> <td></td> <td>83616</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td>ADA</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Duane Riggs	2101 N. Corsey	Eagle, ID	ADA		83616	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Colleen Riggs	2101 N. Corsey	Eagle, ID	83616		83616	Manager <input type="checkbox"/> Member <input type="checkbox"/>				ADA			Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 119437 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature:  Name (type or print): <u>Duane H. Riggs</u> </div> <div> Date: <u>3-8-18</u> Title: <u>Manager</u> </div> </div>																																				

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