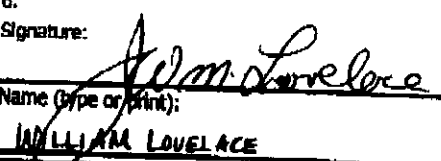


No. W 62367		Reinstatement Annual Report Form ADMIN DISSOLVED 08/10/2011		2. Registered Agent and Office (NOT A P.O. BOX) 3 L SWENSON 12426 W EXPLORER DRIVE BOISE ID 83713 D. RYAN MINERT 2289 S. BONITO WAY, SUITE 100 MERIDIAN, ID 83642	
Reign to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. DBSI LOOP 1604 LLC 12426 W EXPLORER DRIVE BOISE ID 83713 USA 2289 S. BONITO WAY, SUITE 100 MERIDIAN, ID 83642		3. New Registered Agent Signature. 	
REINSTATEMENT FEE DUE: \$30.00					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager or Member		Name		Street or PO Address	
Manager ☒ Member ☐		WILLIAM LOVELACE		569 LEXINGTON CIRCLE	
Manager ☐ Member ☐					
Manager ☐ Member ☐					
Manager ☐ Member ☐					
City		State		Country	
MEMPHIS		TN		USA	
Postal Code		38120			
5. Organized Under the Laws of: IDAHO W 62367		6. Signature:  Name (Type or Print): WILLIAM LOVELACE			
Issued 09/12/2013 by SLD		Date: Sept. 16, 2013		Title: MANAGER	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM