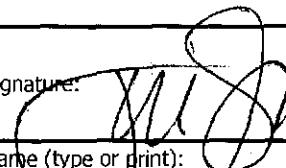
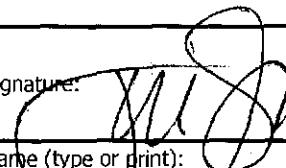
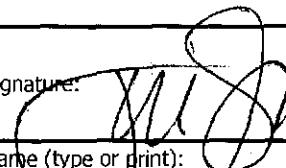


No. W 75505		Reinstatement Annual Report Form ADMIN DISSOLVED 09/22/2015		2. Registered Agent and Office (NOT A P.O. BOX) JAMES SMITH 2385 NE 16TH ST FRUITLAND ID 83619																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. GEMINI PROPERTIES, LLC ANITA M SMITH PO BOX 622 FRUITLAND ID 83619		3. New 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"> <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>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td colspan="6">James Smith 2385 NE 16th St Fruitland, ID Payette 83619</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td colspan="6">Anita Smith " " " " "</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	James Smith 2385 NE 16th St Fruitland, ID Payette 83619						Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Anita Smith " " " " "						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																		
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	James Smith 2385 NE 16th St Fruitland, ID Payette 83619																																							
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Anita Smith " " " " "																																							
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																								
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																								
5. Organized Under the Laws of: IDAHO W 75505		<table border="1"> <tr> <td>6.</td> <td>Signature: </td> <td>Date: 2-25-16</td> </tr> <tr> <td></td> <td>Name (type or print): James Smith</td> <td>Title: Member</td> </tr> </table>				6.	Signature: 	Date: 2-25-16		Name (type or print): James Smith	Title: Member																													
6.	Signature: 	Date: 2-25-16																																						
	Name (type or print): James Smith	Title: Member																																						
Issued 02/25/2016 by CLH																																								