

Reinstatement for W 40036

Page 1 of 2

No. W 40036	Reinstatement Annual Report Form ADMIN DISSOLVED 09/08/2009		2. Registered Agent and Office (NOT A P.O. BOX) LARRY A JARRETT DOWN RIVER RD <i>River Rd</i> LAZY J DR STITES ID 83552																					
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. KODIAK ADVENTURES LODGE, LLC PO BOX 8 STITES ID 83552																							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</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></td> <td><i>Reg-agent - owner</i></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td><i>Larry A Jarrett</i></td> <td><i>BOX 8</i></td> <td><i>STITES ID</i></td> <td><i>USA</i></td> <td></td> <td><i>83552</i></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code		<i>Reg-agent - owner</i>							<i>Larry A Jarrett</i>	<i>BOX 8</i>	<i>STITES ID</i>	<i>USA</i>		<i>83552</i>
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5. Organized Under the Laws of: IDAHO W 40036		6. Signature: <i>[Signature]</i> Date: <i>1-19-10</i> Name (type or print): <i>Larry A Jarrett</i> Title: <i>owner</i>																						

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Notes:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Notes:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Notes:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.