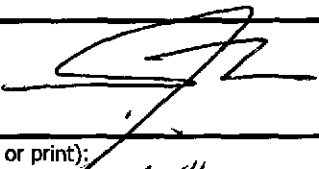


No. W 142391	Reinstatement Annual Report Form ADMIN DISSOLVED 12/28/2017		2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL MILLER 6275 HIGH CREEK COURT IDAHO FALLS ID 83406																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. NEXT GEN SALES, LLC MICHAEL MILLER 6275 HIGH CREEK COURT IDAHO FALLS ID 83406		3. <u>New Registered Agent Signature.</u>																																			
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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Michael Miller</td> <td>6275 High Creek Ct</td> <td>Idaho Falls,</td> <td>ID</td> <td>USA</td> <td>83406</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Shantae Miller</td> <td>6275 High Creek Ct</td> <td>Idaho Falls,</td> <td>ID</td> <td>USA</td> <td>83406</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> <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"/>	Michael Miller	6275 High Creek Ct	Idaho Falls,	ID	USA	83406	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Shantae Miller	6275 High Creek Ct	Idaho Falls,	ID	USA	83406	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 142391	6. Signature:  Date: <u>4/5/18</u> Name (type or print): <u>Michael Miller</u> Title: <u>Manager</u>																																					