

No. <b>W 117133</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																			
Return to: <b>SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</b>	1. <b>Mailing Address: Correct in this box if needed.</b> <b>NIMBUS INTEGRATION GROUP, LLC BERNARD KATTNER 1111 S ORCHARD ST STE 230 BOISE ID 83705</b>		<b>CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA</b>																																			
<b>REINSTATEMENT FEE DUE: \$30.00</b>			3. <u>New</u> Registered Agent Signature.																																			
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <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>Bernard KATTNER</td> <td>1111 S Orchard St #230</td> <td>Boise</td> <td>ID</td> <td></td> <td>83705</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Steven Hatch</td> <td>1111 S Orchard St #230</td> <td>Boise</td> <td>ID</td> <td></td> <td>83705</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Bernard KATTNER	1111 S Orchard St #230	Boise	ID		83705	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Steven Hatch	1111 S Orchard St #230	Boise	ID		83705	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"/>	Bernard KATTNER	1111 S Orchard St #230	Boise	ID		83705																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Steven Hatch	1111 S Orchard St #230	Boise	ID		83705																																
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of:  <b>IDAHO W 117133</b>	<p>6. Signature: <u><i>Steven Hatch</i></u> Date: <u>2014/12/29</u></p> <p>Name (type or print): <u>Steven Hatch</u> Title: <u>Member</u></p>																																					

Issued 12/29/2014 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**