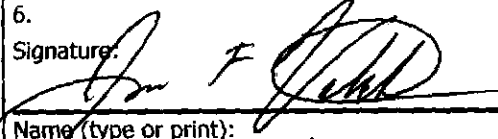


## FILED EFFECTIVE

No. <b>W 11127</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/14/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JIM VALENTINE <del>14284 LEWIS LANE</del> <del>NAMPA ID 83686</del> 349 E River Quarry Dr Eagle ID 83616																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> SUNDANCE AVIATION GROUP, LLC JIM F VALENTINE <del>14284 LEWIS LANE</del> <del>NAMPA ID 83686 USA</del> 349 E. River Quarry Dr Eagle ID 83616		3. <u>New</u> Registered Agent Signature.																																			
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>Jim F Valentine</td> <td>349 E River Quarry Dr</td> <td>Eagle</td> <td>ID</td> <td>USA</td> <td>83616</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> <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"/>	Jim F Valentine	349 E River Quarry Dr	Eagle	ID	USA	83616	Manager <input type="checkbox"/> Member <input type="checkbox"/>							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:  <b>IDAHO</b> <b>W 11127</b>		6. Signature:  Date: <u>3/13/18</u> Name (type or print): <u>Jim F Valentine</u> Title: <u>Manager</u>																																				

Issued 03/12/2018 by online