

No. W 45913	Reinstatement Annual Report Form ADMIN DISSOLVED 03/10/2014		2. Registered Agent and Office (NOT A P.O. BOX) VALERIE ROBINSON 415 N LOCUST GROVE RD KUNA ID 83634																																			
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. GOLD RIVER CONSTRUCTION L.L.C. JEFF L ROBINSON 415 N LOCUST GROVE RD KUNA ID 83634 USA		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 ☒ Member ☐</td> <td>Valerie Robinson</td> <td>415 N Locust Grove</td> <td>Kuna</td> <td>ID</td> <td>83634</td> <td></td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Jeff Robinson</td> <td>415 N. Locust Grove</td> <td>Kuna</td> <td>ID</td> <td>83634</td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☐	Valerie Robinson	415 N Locust Grove	Kuna	ID	83634		Manager ☐ Member ☒	Jeff Robinson	415 N. Locust Grove	Kuna	ID	83634		Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 45913		6. Signature: <u>Valerie Robinson</u> Date: <u>4/21/14</u> Name (type or print): <u>Valerie Robinson</u> Title: <u>4/21/14</u>																																				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM