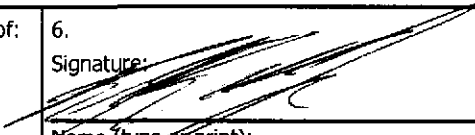


No. W 90061	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015		2. Registered Agent and Office (NOT A P.O. BOX) RODNEY WOLFE 5974 N WILLOWDALE LN BOISE ID 83714																												
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. MBFC OF SOUTHWEST IDAHO, LLC RODNEY R WOLFE 7988 W MARIGOLD ST, STE 100 BOISE ID 83714 USA 800 W. MAIN ST, STE 1460 BOISE, ID 83702		3. <u>New</u> Registered Agent Signature FILED																												
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																															
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																					
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<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;">Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td style="width: 25%;">RODNEY WOLFE</td> <td style="width: 30%;">800 W. MAIN ST STE 1460</td> <td style="width: 15%;">BOISE, ID</td> <td style="width: 10%;">ID</td> <td style="width: 10%;"></td> <td style="width: 15%;">83702</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>LISA WOLFE</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> </table>				Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	RODNEY WOLFE	800 W. MAIN ST STE 1460	BOISE, ID	ID		83702	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	LISA WOLFE	"	"	"	"	"	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: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 90061 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature:  <hr/> Name (type or print): RODNEY R WOLFE </div> <div style="width: 35%; text-align: right;"> Date: 7/5/17 <hr/> Title: Member </div> </div>																													