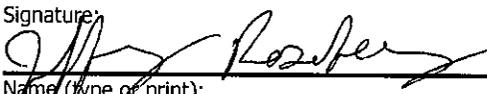
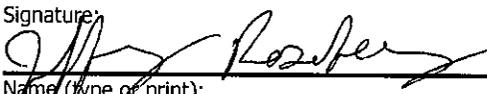
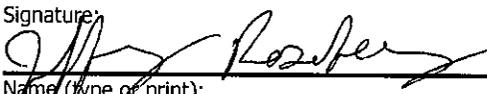


No. <b>W 100776</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 05/10/2013</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JEFFREY ROSENBERG 3446 E 450 N LEWEISVILLE ID 83431																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> ROSENBERG PROPERTIES, LLC JEFFREY ROSENBERG <del>PO BOX 128</del> <del>LEWISVILLE ID 83431</del> 635 Big Ridge Meadows Dr. Afton, WY 83110		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%; text-align: left;">Manager or Member</th> <th style="width:25%; text-align: left;">Name</th> <th style="width:30%; text-align: left;">Street or PO Address</th> <th style="width:10%; text-align: left;">City</th> <th style="width:10%; text-align: left;">State</th> <th style="width:10%; text-align: left;">Country</th> <th style="width:10%; text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Jeffrey Rosenberg</td> <td>3446 E 450 N.</td> <td>Lewisville</td> <td>ID</td> <td>US</td> <td>83431</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 checked="" type="checkbox"/>	Jeffrey Rosenberg	3446 E 450 N.	Lewisville	ID	US	83431	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:  <div style="text-align: center; font-size: 1.2em;">                     IDAHO W 100776                 </div>	6. <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%; padding: 5px;">                     Signature:   </td> <td style="width:30%; padding: 5px;">                     Date:                      7/8/13                 </td> </tr> <tr> <td style="padding: 5px;">                     Name (type or print):                      Jeffrey Rosenberg                 </td> <td style="padding: 5px;">                     Title:                      President                 </td> </tr> </table>			Signature: 	Date: 7/8/13	Name (type or print): Jeffrey Rosenberg	Title: President																															
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