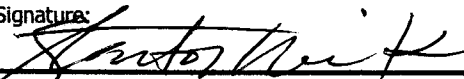
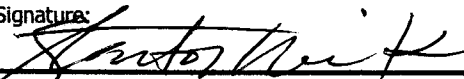
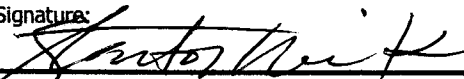


No. <b>W 137902</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 08/25/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b>  DART WARZ, LLC STANTON WILKERSON <del>337 N STONY BROOK WAY</del> <del>EAGLE ID 83616</del> Corrected: P.O. Box 2359 Eagle, Idaho 83616		STANTON WILKERSON <del>337 N STONY BROOK WAY</del> <del>EAGLE ID 83616</del> 501 E. Scenery Lane, Suite 100 Meridian, ID 83642  3. <u>New</u> Registered Agent Signature.																																				
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <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>Stanton Wilkerson</td> <td>P.O. Box 2359</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"/>	Stanton Wilkerson	P.O. Box 2359	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 W 137902</b>		6. <table border="1"> <tr> <td>Signature: </td> <td>Date: <u>9/3/15</u></td> </tr> <tr> <td>Name (type or print): Stanton Wilkerson <u>Stanton Wilkerson</u></td> <td>Title: <u>Owner</u></td> </tr> </table>			Signature: 	Date: <u>9/3/15</u>	Name (type or print): Stanton Wilkerson <u>Stanton Wilkerson</u>	Title: <u>Owner</u>																															
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