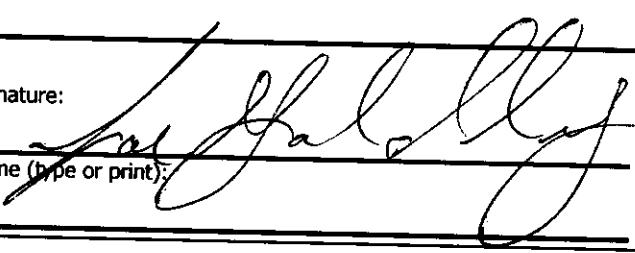


No. W 103994	Reinstatement Annual Report Form ADMIN DISSOLVED 09/20/2012				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. G&S EMPIRE LLC 2515 E CHICAGO ST NAMPA ID 83687 8000 E Jacob DR. NAMPA ID 83687				
REINSTATEMENT FEE DUE: \$30.00	2. Registered Agent and Office (NOT A P.O. BOX) JOE GOLDBERG 2515 E CHICAGO ST NAMPA ID 83687 8000 E Jacob DR. NAMPA ID 83687				
3. New Registered Agent Signature.					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Name	Street or PO Address	City	State	Country
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Joe Goldberg 8000 E Jacob DR NAMPA ID CANYON 83687 mania Goldberg "				
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of: IDAHO W 103994		6. Signature:  Date: 9-20-13 Name (type or print): <u>Joe Goldberg</u> Title: <u>Manager</u>			
Issued 09/20/2013 by CLH					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM