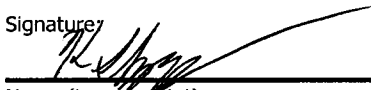


No. W 149340 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 06/23/2016 1. Mailing Address: Correct in this box if needed. <div style="border: 1px solid black; border-radius: 50%; padding: 5px; display: inline-block;"> SHIPPY CUSTOM CONSTRUCTION LLC KADE SHIPPY 3211 VILLAGE GREEN ST CALDWELL ID 83605 </div> <div style="margin-top: 20px;"> 7480 El Paso Rd Caldwell ID 83607 </div>	2. Registered Agent and Office (NOT A P.O. BOX) KADE SHIPPY 3211 VILLAGE GREEN ST CALDWELL ID 83605 7480 El Paso Rd Caldwell, ID 83607																																			
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: 20%;">Manager or Member</th> <th style="width: 15%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Kade Shippy</td> <td>7480 EL Paso Rd</td> <td>Caldwell</td> <td>ID</td> <td>USA</td> <td>83607</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"/>	Kade Shippy	7480 EL Paso Rd	Caldwell	ID	USA	83607	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-weight: bold;"> IDAHO W 149340 </div>	6. Signature:  <hr/> Name (type or print): Kade Shippy																																				
Date: 7-7-2016 <hr/> Title: Manager																																					
Issued 07/01/2016 by online																																					