No. W 164826	Reinstatement Annual Report Form ADMIN DISSOLVED 07/26/2017 1. Mailing Address: Correct in this box if needed. JH AFFILIATES, LLC JAN HIGLEY 34 E 100 S PIGBY ID 83350 RAPENT	2. Registered Agent and Office (NOT A P.O. BOX) JAN HIGLEY 34 E 100 S RIGBY ID 83350 RUPERT
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		
REINSTATEMENT FEE DUE: \$30.00		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. Manager or Member Name Street or PO Address City State Country Postal Code Manager Member Jan Hig III 34 & 100 P Rufert ID USN 83350 Manager Member Manager Member Manager Member Manager Member Manager Member		
5. Organized Under the La IDAHO W 164826 Issued 08/31/2017 by onlin	Signature: Name (type or print):	Date: 8-30-17 Title: Manager

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM