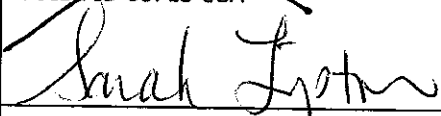
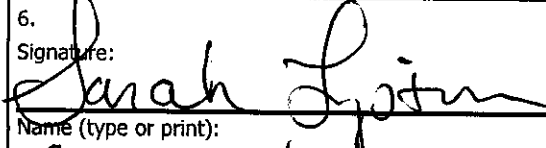


No. W 101329	Reinstatement Annual Report Form ADMIN DISSOLVED 06/07/2012		2. Registered Agent and Office (NOT A P.O. BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA 							
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. FOOD THOUGHT COLLECTIVE, LLC 260 MAIN ST PO Box 6546 KETCHUM ID 83340		3. New Registered Agent Signature. SARAH LIPTON 260 MAIN KETCHUM ID 83340							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.										
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code				
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Sarah Lipton PO 6546 KETCHUM ID USA 83340										
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Rulon TATE PEARSON PO 6546 KETCHUM ID USA 83340										
Manager <input type="checkbox"/> Member <input type="checkbox"/>										
Manager <input type="checkbox"/> Member <input type="checkbox"/>										
5. Organized Under the Laws of: <div style="text-align: center; font-size: large;"> IDAHO W 101329 </div>		6. Signature:  Name (type or print): <u>Sarah Lipton</u> Date: <u>10.31.12</u> Title: <u>member</u>								
Issued 10/30/2012 by KAH										

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM