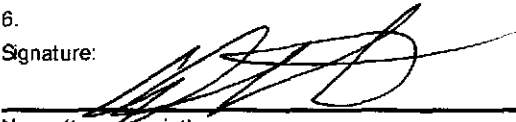


No. W 167769	Reinstatement Annual Report Form ADMIN DISSOLVED 09/27/2017		2. Registered Agent and Office (NOT A P.O. BOX) DARREN HELM 223 RICKS AVE REXBURG ID 83440																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. GUARDIAN LLC DARREN HELM PO BOX 474 PO Box 554 REXBURG ID 83440 Rigby, ID 83442		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Darren Helm</td> <td>PO Box 474</td> <td>REXBURG</td> <td>ID</td> <td>US</td> <td>83440</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Darren Helm	PO Box 474	REXBURG	ID	US	83440	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: IDAHO W 167769		6. Signature:  Date: 10-12-17 Name (type or print): Darren Helm Title: Owner																																				

Issued 10/12/2017 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Use of this form requires special attention to the mailing address. If the