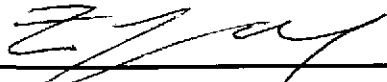
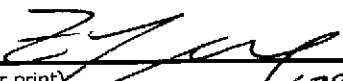
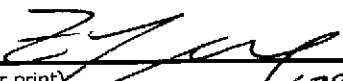
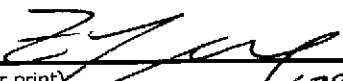


| No. W 48462 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00 | Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2010 1. Mailing Address: Correct in this box if needed. FOX LAW OFFICE, PLLC FOX LAW OFFICE PLLC BRETT ROBERT FOX Zack R. Fox 290 BOBWHITE CT STE 300 131 W Braemere BOISE ID 83706 Boise, ID 83702 | | 2. Registered Agent and Office (NOT A P.O. BOX) BRETT ROBERT FOX Zackary R. Fox 355 N MYRTLE #100 131 W Braemere BOISE ID 83702 Boise, ID 83702 3. <u>New</u> Registered Agent Signature.  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|----------------------|--|-------|--|-------------|-----------------------|---------|-------------------------------|---|----------------|-----------------|-------|----|-----|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">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>Zack Fox (Son)</td> <td>131 W. Braemere</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83702</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"/> | Zack Fox (Son) | 131 W. Braemere | Boise | ID | USA | 83702 | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Zack Fox (Son) | 131 W. Braemere | Boise | ID | USA | 83702 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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-weight: bold; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">W 48462</div> | 6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;">Signature:</td> <td style="width: 40%;">Date:</td> </tr> <tr> <td></td> <td>11/19/14</td> </tr> <tr> <td>Name (type or print):</td> <td>Title:</td> </tr> <tr> <td>Zack Fox (PR to Brett R. Fox)</td> <td>Son/Manager</td> </tr> </table> | | Signature: | Date: |  | 11/19/14 | Name (type or print): | Title: | Zack Fox (PR to Brett R. Fox) | Son/Manager | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature: | Date: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 11/19/14 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name (type or print): | Title: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Zack Fox (PR to Brett R. Fox) | Son/Manager | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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