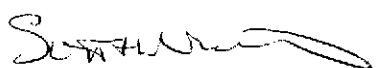
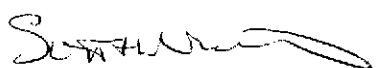
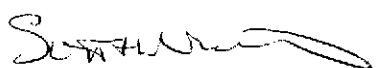


No. <b>W 160739</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/02/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> BRIAN KRUEGER 1734 S TOLUKA WAY BOISE ID 83712
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> PROFESSIONAL RESOURCE LOGISTICS, LLC. SCOTT NICHOLS 2730 W VAL VISTA CT MERIDIAN ID 83642		3. <u>New</u> Registered Agent Signature.
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			

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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>	SCOTT NICHOLS	2730 W VAL VISTA CT	MERIDIAN	ID		83642
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	JENNIFER NICHOLS	2730 W VAL VISTA CT	MERIDIAN	ID		83642
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;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 160739</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: 8/11/17         </td> </tr> <tr> <td>           Name (type or print):            SCOTT H NICHOLS         </td> <td>           Title:            MANAGER         </td> </tr> </table>	Signature: 	Date: 8/11/17	Name (type or print): SCOTT H NICHOLS	Title: MANAGER
Signature: 	Date: 8/11/17				
Name (type or print): SCOTT H NICHOLS	Title: MANAGER				

Issued 08/11/2017 by TLB