

No. W 131889	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2016		Change ↗ 2. Registered Agent and Office (NOT A P.O. BOX) SHANE DAVID MALLARD 689 E 700 N 638 N. 700 E. FIRTH ID 83236																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080				1. Mailing Address: Correct in this box if needed. ASPEN RIDGE LLC SHANE DAVID MALLARD 689 E 700 N 638 N. 700 E. FIRTH ID 83236																																		
REINSTATEMENT FEE DUE: \$30.00			3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%;"> <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 ☒ Member ☐</td> <td>Shane Mallard</td> <td>638 N 700 E</td> <td>Firth, Id</td> <td></td> <td></td> <td>83236</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Matt Johnson</td> <td>720 N. E Street</td> <td>Livingston,</td> <td></td> <td></td> <td>mt. 59047</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Trevor Jolley</td> <td>161 W. Oak St.</td> <td>Shelley Id.</td> <td></td> <td></td> <td>83274</td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☐	Shane Mallard	638 N 700 E	Firth, Id			83236	Manager ☐ Member ☒	Matt Johnson	720 N. E Street	Livingston,			mt. 59047	Manager ☐ Member ☒	Trevor Jolley	161 W. Oak St.	Shelley Id.			83274	Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 131889		6. Signature: <u>Shane</u> Name (type or print): <u>Shane Mallard</u> Date: <u>4/21/16</u> Title: <u>owner</u>																																				

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