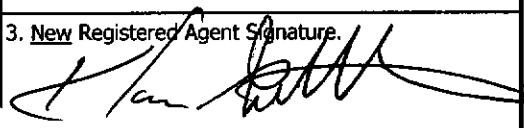
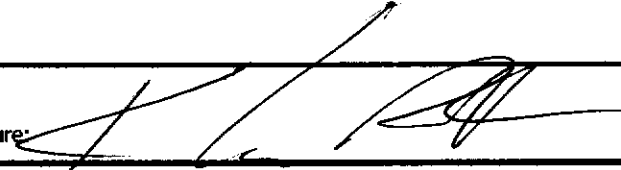


No. W 75728	Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) BARBARA HARRIS 2369 RIDGEVIEW WAY 647 S. St. ^{te} BOISE ID 83712 Kuna ID 83634 KLAUS RUTKE
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. TVFR, LLC BARBARA HARRIS KLAUS RUTKE 2369 RIDGEVIEW WAY BOISE BOISE ID 83712 P.O. BOX 50122 BOISE ID 83705		3. New Registered Agent Signature. 
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.			
Manager/Member	Name	Street or PO Address	City State Country Postal Code
MEMBER	KLAUS RUTKE	PO BOX 50122	BOISE ID USA 83634
5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 75728 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Signature:  <hr/> Name (type or print): <u>KLAUS RUTKE</u> </div> <div> Date: <u>11/29/10</u> <hr/> Title: <u>MEMBER</u> </div> </div>	
Issued 11/29/2010 by JL1			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM