No. W 67316	Reinstatement Annual Report Form	Registered Agent and Office (NOT A P.O. BOX)
Return to:	ADMIN DISSOLVED 01/13/2012	MICHAEL W MONTGOMERY
SECRETARY OF STATE 450 N 4th STREET	1. Mailing Address: Correct in this box if needed.	POGATELLO ID 83291-
PO BOX 83720	MONTGOMERY ENTERPRISES, LLC.	3312 Fuller Road
BOISE, ID 83720-0080	MICHAEL W MONTGOMERY	Emmett, IP 83617
	247 SOTHAVE 3312 Fuller Model	3. New Registered Agent Signature.
	POCATELLO ID 83201 Emmett, ID 83617 USA	
REINSTATEMENT		'
FEE DUE: \$30.00		
4. Limited Liability Compar	nies: Enter Names and Addresses of Managers OR Members, Se	e Instructions.
Manager o <u>r Me</u> mber Nan	me Street or PO Address	City State Country Postal Code
Manager Membe (circle one)	Michael Montgamery; 3312 Pulser Road >	Emmett JIDJ USA 83617
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		<i>,</i>
	•	
5. Organized Under the Laws o	of: 6.	
ļ	Signature.	Date: 3/26/12
IDAHO		200.4/20
W 67316	100	
	Name (type or print): # VI - / / / VI	THE D IA . /1-
	Name (type or print): Michael Monta	omery Title: 3/25/12

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.