

No. <b>W 51828</b>	Reinstatement Annual Report Form ADMIN DISSOLVED 09/23/2014		2. Registered Agent and Office (NOT A P.O. BOX) <i>Jared Alexander</i> <i>PO Box 1958</i> <i>McCall, ID 83638</i>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. RESERVE ON PAYETTE RIVER LLC (THE) <del>MEMBERS</del> <i>c/o Jared Alexander</i> <del>301 A WARE ST</del> <i>PO Box 1958</i> MCCALL ID 83638 <i>McCall, Id</i> <i>83638</i>		3. New Registered Agent Signature. <i>[Signature]</i>																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <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 <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td><i>Mike Eckhart</i></td> <td><i>P.O. Box 289</i></td> <td><i>McCall, ID</i></td> <td><i>Id</i></td> <td><i>Valley</i></td> <td><i>83638</i></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td><i>Jared Alexander</i></td> <td><i>PO Box 1958</i></td> <td><i>McCall, ID</i></td> <td><i>Id</i></td> <td><i>Valley</i></td> <td><i>83638</i></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"/>	<i>Mike Eckhart</i>	<i>P.O. Box 289</i>	<i>McCall, ID</i>	<i>Id</i>	<i>Valley</i>	<i>83638</i>	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	<i>Jared Alexander</i>	<i>PO Box 1958</i>	<i>McCall, ID</i>	<i>Id</i>	<i>Valley</i>	<i>83638</i>	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <b>IDAHO W 51828</b>	6. Signature: <i>[Signature]</i> Date: <i>12-22-14</i> Name (type or print): <i>Mike Eckhart</i> Title: <i>manager</i>																																					

Issued 12/18/2014 by JL1

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**

**Block 1: Entity name may not be altered through the use of this form.** Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be...