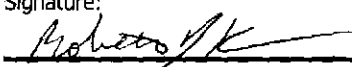


No. W 132118	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015		2. Registered Agent and Office (NOT A P.O. BOX) GREG MALONE 510 2ND ST WALLACE ID 83873
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. HOMESTEAD BREWING SERVICES, LLC GREG MALONE 510 2ND ST WALLACE ID 83873		3. <u>New</u> Registered Agent Signature.
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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Greg Malone	510 2nd St	Wallace ID USA 83873
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Robert Keener	P.O. Box 195	Silverton ID USA 83867
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-size: 1.2em;"> IDAHO W 132118 </div>		6. Signature: <u></u> Date: <u>5/11/2015</u> Name (type or print): <u>Robert J. Keener</u> Title: <u>Member</u>	
Issued 05/11/2015 by online			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM