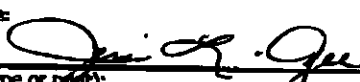
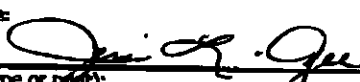
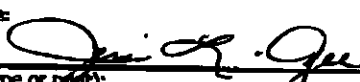


<b>No. W 64666</b>		<b>Reinstatement Annual Report Form ADMIN DISSOLVED 10/06/2009</b>		<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> JERI L GEE 421 S 10TH S ST MARIES ID 83861																																				
<b>Return to:</b> SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b> JERI'S SATORI, LLC 421 S 10TH ST ST MARIES ID 83861																																						
<b>REINSTATEMENT FEE DUE: \$30.00</b>				<b>3. New Registered Agent Signature.</b>																																				
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>																																								
<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 type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>Jeri L Gee</td><td>421 S 10<sup>th</sup></td><td>St Maries</td><td>ID</td><td>Benevolence</td><td>83861</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><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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Jeri L Gee	421 S 10 <sup>th</sup>	St Maries	ID	Benevolence	83861	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  IDAHO W 64666		<b>6.</b> <table border="1"><tr><td><b>Signature:</b> </td><td><b>Date:</b> 9-10-13</td></tr><tr><td><b>Name (type or print):</b> Jeri L. Gee</td><td><b>Title:</b> Member</td></tr></table>				<b>Signature:</b> 	<b>Date:</b> 9-10-13	<b>Name (type or print):</b> Jeri L. Gee	<b>Title:</b> Member																															
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Issued 09/10/2013 by JL1																																								

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**