

REINSTATEMENT

No. W 2248 Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0080 FEE DUE 10.00	Annual Report Form 1. Mailing Address - Please Correct, If Not Correct WOLF MOUNTAIN, LLC MAIDA DARJANY Barbara A. McClain PO BOX 40 Box 374 IDAHO CITY ID 83631	2. Registered Agent and Office NOT A P.O. BOX MAIDA DARJANY Barbara A. McClain FLK CREEK PARK, FLK CREEK RD IDAHO CITY ID 83631 12 Grump Blvd, PineTop Estates 3. Organized Under the Laws of: ID W 2248																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Barbara A. McClain</td> <td>P.O. Box 374</td> <td>Idaho City</td> <td>ID</td> <td>83631-0374</td> </tr> <tr> <td>Manager</td> <td>Karen S. Niederhut</td> <td>5541 Willow Cr. Rd.</td> <td>Eagle</td> <td>ID</td> <td>83616</td> </tr> </tbody> </table>			Office Held	Name	Street or P.O. Address	City	State	Zip	Manager	Barbara A. McClain	P.O. Box 374	Idaho City	ID	83631-0374	Manager	Karen S. Niederhut	5541 Willow Cr. Rd.	Eagle	ID	83616
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Manager	Barbara A. McClain	P.O. Box 374	Idaho City	ID	83631-0374															
Manager	Karen S. Niederhut	5541 Willow Cr. Rd.	Eagle	ID	83616															
5. Signature of Registered Agent Barbara A. McClain	6. Signature: Barbara A. McClain Date: 11-26-97 Name (Typed or Printed): Barbara A. McClain Title: Manager																			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.
 Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Corporation: Block 6 must be signed by an officer or chairman of the board of the corporation. Signer must specify his or her title.
 Limited Liability Company: Block 6 must be signed by a manager or member, who must specify his or her title.
- 6.) If new registered Agent, please sign block 5.

IDAHO SECRETARY OF STATE

11/26/1997 09:00
 CK: 4232 CT: 90386 BH: 58824

1 @ 10.00 = 10.00 REINST LLC