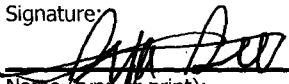


No. W 122074	Reinstatement Annual Report Form ADMIN DISSOLVED 05/14/2014		2. Registered Agent and Office (NOT A P.O. BOX) RYAN REILLEY 1759 NE SUMMERWIND DR MOUNTAIN HOME ID 83647																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00				1. Mailing Address: Correct in this box if needed. INTEGRITY TRANSPORT SERVICES, LLC RYAN REILLEY 1759 NE SUMMERWIND DR MOUNTAIN HOME ID 83647																																		
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>Ryan Reilley</td> <td>1759 NE Summerwind Dr.</td> <td>Mountain Home,</td> <td>ID</td> <td>USA</td> <td>83647</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Travis Martin</td> <td>1759 NE Summerwind Dr.</td> <td>Mountain Home,</td> <td>ID</td> <td>USA</td> <td>83647</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Michala Stahura</td> <td>1759 NE Summerwind Dr.</td> <td>Mountain Home,</td> <td>ID</td> <td>USA</td> <td>83647</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"/>	Ryan Reilley	1759 NE Summerwind Dr.	Mountain Home,	ID	USA	83647	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Travis Martin	1759 NE Summerwind Dr.	Mountain Home,	ID	USA	83647	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Michala Stahura	1759 NE Summerwind Dr.	Mountain Home,	ID	USA	83647	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Ryan Reilley	1759 NE Summerwind Dr.	Mountain Home,	ID	USA	83647																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Travis Martin	1759 NE Summerwind Dr.	Mountain Home,	ID	USA	83647																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Michala Stahura	1759 NE Summerwind Dr.	Mountain Home,	ID	USA	83647																																
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of: IDAHO W 122074		6. Signature: <u></u> Name (type or print): <u>Ryan Reilley</u> Date: <u>8/8/16</u> Title: <u>CFA</u>																																				