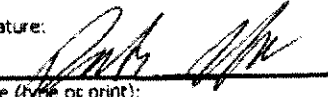


No. W 47516	Reinstatement Annual Report Form ADMIN DISSOLVED 05/09/2012		2. Registered Agent and Office (NOT A P.O. BOX) PATRICK HILL 227 RIO VISTA MCCALL ID 83638																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00					1. Mailing Address: Correct in this box if needed. MEADOWS RV PARK, LLC PATRICK HILL 227 RIO VISTA MCCALL ID 83638																																		
3. <u>New</u> Registered Agent Signature:																																							
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 ☐ Member ☒</td> <td>PAT Hill</td> <td>309 E. Lake Street Suite #3</td> <td>MCCALL</td> <td>ID</td> <td>US</td> <td>83638</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>TED ALNOLD</td> <td>183 MORRINE</td> <td>EAGLE</td> <td>ID</td> <td>US</td> <td>83616</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☐ Member ☒	PAT Hill	309 E. Lake Street Suite #3	MCCALL	ID	US	83638	Manager ☐ Member ☒	TED ALNOLD	183 MORRINE	EAGLE	ID	US	83616	Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 47516		6. Signature:  Name (type or print): PATRICK Hill			Date: 6/20/12 Title: Member																																		