

No. <b>W 17602</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 03/12/2012</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  MULCHAY PROPERTIES L.L.C.  20667 N FRANKLIN BLVD NAMPA ID 83687	<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> SANDRA L MULCHAY 20667 N FRANKLIN BLVD NAMPA ID 83687  <b>3. New Registered Agent Signature.</b>
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**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 checked="" type="checkbox"/> Member <input type="checkbox"/>	PAUL M. MULCHAY	20667 FRANKLIN BLVD	NAMPA	ID		83687
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	SANDRA L. MULCHAY	20667 FRANKLIN BLVD.	NAMPA	ID		83687
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-weight: bold;">IDAHO W 17602</div>	<b>6.</b> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: <u>Sandra L. Mulchay</u></td> <td style="width: 40%;">Date: <u>4-19-12</u></td> </tr> <tr> <td>Name (type or print): <u>SANDRA L. MULCHAY</u></td> <td>Title: <u>MEMBER</u></td> </tr> </table>	Signature: <u>Sandra L. Mulchay</u>	Date: <u>4-19-12</u>	Name (type or print): <u>SANDRA L. MULCHAY</u>	Title: <u>MEMBER</u>
Signature: <u>Sandra L. Mulchay</u>	Date: <u>4-19-12</u>				
Name (type or print): <u>SANDRA L. MULCHAY</u>	Title: <u>MEMBER</u>				

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