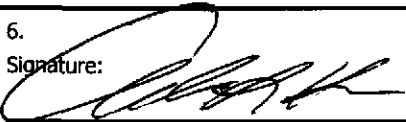
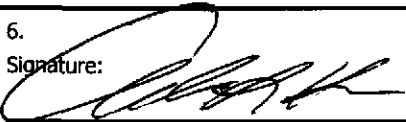
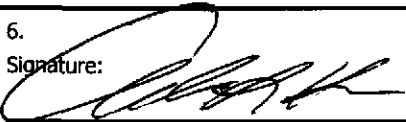


No. W 103715	Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014		2. Registered Agent and Office (NOT A P.O. BOX) MARK L HESS 2424 E CHICAGO ST CALDWELL ID 83607
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. IDAHO DRAFTHORSE & EQUIPMENT SALES LLC. PO BOX 1326 CALDWELL ID 83607		3. <u>New</u> Registered Agent Signature.

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"/>	MARK L. HESS	P.O. Box 1326	Caldwell	ID	USA	83607
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 103715 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>9-26-14</u> </td> </tr> <tr> <td> Name (type or print): <u>MARK L. HESS MANAGER</u> </td> <td> Title: <u>MANAGER</u> </td> </tr> </table>	Signature: 	Date: <u>9-26-14</u>	Name (type or print): <u>MARK L. HESS MANAGER</u>	Title: <u>MANAGER</u>
Signature: 	Date: <u>9-26-14</u>				
Name (type or print): <u>MARK L. HESS MANAGER</u>	Title: <u>MANAGER</u>				

Issued 09/26/2014 by DK1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM