


| No. W 30242 | Reinstatement Annual Report Form ADMIN DISSOLVED 07/08/2008 | | 2. Registered Agent and Office (NOT A P.O. BOX) BRUCE MAGER 1576 N TRELLIS PLACE EAGLE ID 83616 | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|---|-------|--|-------------|--|------|-------|---------|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 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. VENTURE SOLUTIONS, LLC BRUCE MAGER 1576 N TRELLIS PLACE EAGLE ID 83616 | | 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 colspan="7"> Manager <input checked="" type="radio"/> Member (circle one) </td> </tr> <tr> <td colspan="7"> BRUCE MAGER 1576 N TRELLIS PL EAGLE ID. US 83616 </td> </tr> </tbody> </table> | | | | | Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code | Manager <input checked="" type="radio"/> Member (circle one) | | | | | | | BRUCE MAGER 1576 N TRELLIS PL EAGLE ID. US 83616 | | | | | | |
| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | | | | | |
| Manager <input checked="" type="radio"/> Member (circle one) | | | | | | | | | | | | | | | | | | | | | | | | | |
| BRUCE MAGER 1576 N TRELLIS PL EAGLE ID. US 83616 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO W 30242 | | 6. Signature:  Name (type or print): BRUCE G. MAGER Date: 3/4/11 Title: MGR. PRES. | | | | | | | | | | | | | | | | | | | | | | | |
| Issued 03/04/2011 by KAH | | | | | | | | | | | | | | | | | | | | | | | | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.