

No. W 84606	Reinstatement Annual Report Form ADMIN DISSOLVED 09/07/2011		2. Registered Agent and Office (NOT A P.O. BOX) BLAKE WARRINGTON 4595 N EAGLE POINTE PL STAR ID 83669
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. X2REME MARKETING, LLC BLAKE WARRINGTON 1533 N MILWAUKEE BOX 115 BOISE ID 83704		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
<input checked="" type="checkbox"/> Manager <input type="checkbox"/> Member (circle one)	Blake Warrington	1533 N Milwaukee Box 115	Boise	ID	ADA	83704

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;"> IDAHO W 84606 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"> Signature: <u>Blake Warrington</u> </td> <td style="width: 30%;"> Date: <u>3/8/12</u> </td> </tr> <tr> <td> Name (type or print): <u>Blake Warrington</u> </td> <td> Title: <u>Owner</u> </td> </tr> </table>	Signature: <u>Blake Warrington</u>	Date: <u>3/8/12</u>	Name (type or print): <u>Blake Warrington</u>	Title: <u>Owner</u>
Signature: <u>Blake Warrington</u>	Date: <u>3/8/12</u>				
Name (type or print): <u>Blake Warrington</u>	Title: <u>Owner</u>				

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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.