

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

	#A1 A1 14 A4		
The	name of the limited li	ability company is:	
		The Forestry, LLC	
		has been administratively dissolved an ble for use, #3 below must include an	
The	date the articles of o	rganization were filed was:	12/31/2007
CO	MPLETE ONLY THE	APPLICABLE ITEMS	
The	name of the limited li	ability company is amended to	read:
		T.H.E. Forestry LLC	
The	management of the I	imited liability company shall he	enceforth be vested in:
		Manager(s) Memb	
The	information on the m	anagers/members shall be ame	ended as follows:
	<u>Name</u>	Address	Add Delete Other
	TANTIO	<u> </u>	
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			- L. L
	- D	manager, if any, or at least one	
nature:		Andrice I	Secretary of State use only
	owner/operates	dawKins #	
	7 1	CZ/20/De	IDAHO SECRETARY OF S
nature: ped Name	ə:		CX: 1569 CT: 227488 BH:
	·	E SA	1 # 38.88 = 36.88 DRGA

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