No. W 173624	Reinstatement Annual Report Form ADMIN DISSOLVED 03/08/2018	2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 80ISE, ID 83720-0088	1. Mailing Address: Correct in this box if needed. O'RIRIE MANAGEMENT LLC KIRK RIRIE 2061 SWAN VALLEY HWY RIRIE ID 83443	Need to Appoint C. Edward Cather 900 Pier View Drive Suite 206 Idaho Falls, Idaho 83402
REINSTATEMENT FEE DUE: \$30.00		3. New 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 🗌 Member 🖫	Kirk Ririe 2061 SWAN VALLEY HWY, RIF	
Manager Member		
Manager Member		
Manager 🔲 Member 🔲		
5. Organized Under the Law IDAHO W 173624	Signatury: Name (type or prim.): Kirk Ririe	0ate: <u>4-23-/8</u> Title: Member
Issued 04/20/2018 by online 0		