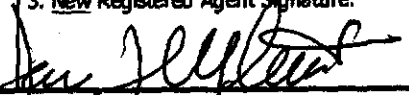


FILED EFFECTIVE

No. W 3989	Reinstatement Annual Report Form ADMIN DISSOLVED 08/07/2012		2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. NORTH COLLEGE CONDOMINIUM ASSOCIATION, L.L.C. MARIN PETERSON 1411 N FILLMORE #601 TWIN FALLS ID 83301 USA <i>James Dekleinhaus</i> PO BOX 716 MAGGAMAN, ID 83332		KENNETH PATTERSON 1411 N FILLMORE #601 TWIN FALLS ID 83301 <i>James Dekleinhaus</i> 4859 River Road Buhl, ID 83316
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
SEXT ☒ Manager ☐ Member ☒	James Dekleinhaus CHAD DOOR	PO BOX 716 1415 Fillmore	MAGGAMAN ID USA 83332 Twin Falls ID USA 83308
Manager ☐ Member ☒	KEN Patterson	"	" " " " "
Manager ☐ Member ☒	TRACY JAVARD	"	" " " " "
Manager ☐ Member ☒	KEVIN Hamblin	"	" " " " "
Manager ☐ Member ☒	ELYSE MCCLAIN	1854 E 4100 N	Buhl " " 83301
5. Organized Under the Laws of:		6.	
IDAHO W 3989		Signature:  Name (type or print): JAMES DEKLEINHAUS	Date: 08/23/12 Title: Secretary
Issued 08/20/2012 by CLH			