
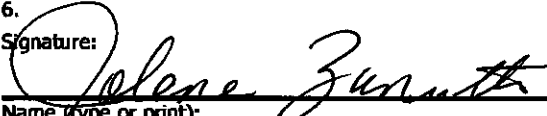
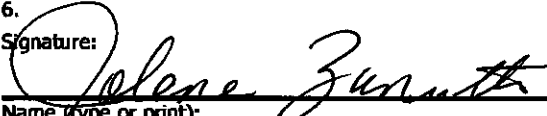
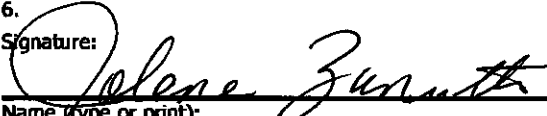


| <b>No. W 9470</b>   | <b>Reinstatement Annual Report Form<br/>ADMIN DISSOLVED 11/14/2012</b>   |  | <b>2. Registered Agent and Office<br/>(NOT A P.O. BOX)</b>  |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|---|-------|--|--------------------------|--|----------------------------|-------|---------|-------------|---|----------------|-------------------|--------|----|-------|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Return to:</b><br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT FEE<br/>DUE: \$30.00</b>  | <b>1. Mailing Address: Correct in this box if needed.</b><br>JOZAN LLC<br><del>XXXXXXXXXX</del> Jolene Zanutto<br>78 S. CHEROKEE ROAD<br>SALMON ID 83467 |  | JOLENE ZANUTTO<br>78 S CHEROKEE ROAD<br>SALMON ID 83467   |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |  |  | <b>3. New Registered Agent Signature.</b><br> |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <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>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td><td>Jolene Zanutto</td><td>78 S. Cherokee Rd</td><td>Salmon</td><td>Id</td><td>Lamhi</td><td>83467</td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table> |  |  |   |       | Manager or Member  | Name                     | Street or PO Address                           | City                       | State | Country | Postal Code | Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | Jolene Zanutto | 78 S. Cherokee Rd | Salmon | Id | Lamhi | 83467 | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  |
| Manager or Member   | Name   | Street or PO Address   | City  | State | Country  | Postal Code              |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>   | Jolene Zanutto   | 78 S. Cherokee Rd  | Salmon  | Id    | Lamhi  | 83467                    |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>  |  |  |   |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>  |  |  |   |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>  |  |  |   |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>5. Organized Under the Laws of:</b><br><br>IDAHO<br>W 9470   |  | <b>6.</b> <table border="1"><tr><td><b>Signature:</b><br/></td><td><b>Date:</b><br/>11-23-12</td></tr><tr><td><b>Name (type or print):</b><br/>Jolene Zanutto</td><td><b>Title:</b><br/>President</td></tr></table> |   |       | <b>Signature:</b><br> | <b>Date:</b><br>11-23-12 | <b>Name (type or print):</b><br>Jolene Zanutto | <b>Title:</b><br>President |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Signature:</b><br>  | <b>Date:</b><br>11-23-12   |  |   |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Name (type or print):</b><br>Jolene Zanutto  | <b>Title:</b><br>President   |  |   |       |  |                          |  |                            |       |         |             |   |                |                   |        |    |       |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Issued 11/23/2012 by JL1

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**