

no. W 25093	Restatement Annual Report Form ADMIN DISSOLVED 10/11/2013		1. Registered Agent and Office (Must A.P.S. 8002) TERRY REID 121 PINEY AVE N KETCHUM ID 83340																																			
Return fee \$30.00 400 W 4th STREET PO BOX 80720 COOK, IL 60010-0070 COMMISSIONER'S FEE Due: \$30.00	2. Filing Address: (Insert in this box if needed.) DENNIS-REID HARRIS, LLC 121 PINEY AVE N PO BOX 2181 KETCHUM ID 83340		3. New Registered Agent Signature:																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions. <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 ☐ Member ☒</td> <td>TERRY REID</td> <td>P.O. Box 2181</td> <td>Ketchum</td> <td>ID.</td> <td></td> <td>83340</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Sharon Davies Reid</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☐ Member ☒	TERRY REID	P.O. Box 2181	Ketchum	ID.		83340	Manager ☐ Member ☒	Sharon Davies Reid						Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the laws of: IDAHO W 25093		6. Signature: <i>[Signature]</i> Name (Print or type): Sharon Davies Reid - Member Date: 11/04/13																																				