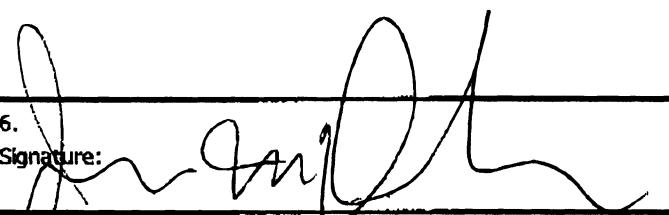


3/4/2014

W78178

No. W 78178	Reinstatement Annual Report Form ADMIN DISSOLVED 01/16/2014		2. Registered Agent and Office (NOT A P.O. BOX) JONATHON MCOMBER 1116 ARTIC WILLOW DR REXBURG ID 83440	
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. J MCOMBER LLC JONATHAN C MCOMBER 1116 ARTIC WILLOW DR REXBURG ID 83440		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE \$30.00				
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 <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Jonathan C MComber	1116 Arctic Willow Dr	Rexburg	ID USA 83440
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Angela D MComber	same as above		
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
5. Organized Under the Laws of:	6. Signature:		Date: <u>Feb. 27, 2014</u>	
IDAHO W 78178			Title: <u>Member</u>	
Name (type or print): <u>Jonathan C. MComber</u>				

Issued 03/04/2014 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM