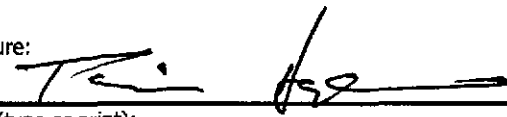


No. <b>W 138349</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 08/14/2017</b>  <b>1. Mailing Address: Correct in this box if needed.</b> ON POINT INVESTORS, LLC TIMOTHY T HOPKINS 3445 HARVEST MOON DRIVE KIMBERLY ID 83341	<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> TIMOTHY T HOPKINS 3445 HARVEST MOON DR KIMBERLY ID 83341  <b>3. <u>New</u> Registered Agent Signature.</b>																																			
<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 type="checkbox"/> Member <input type="checkbox"/></td> <td>Tim Hopkins</td> <td>3445 Harvest Moon</td> <td>Kimberly</td> <td>ID</td> <td>USA</td> <td>83341</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 type="checkbox"/> Member <input type="checkbox"/>	Tim Hopkins	3445 Harvest Moon	Kimberly	ID	USA	83341	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 type="checkbox"/> Member <input type="checkbox"/>	Tim Hopkins	3445 Harvest Moon	Kimberly	ID	USA	83341																															
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>  IDAHO W 138349	<b>6.</b> Signature: <u></u> Date: <u>8/28/17</u> Name (type or print): <u>Tim Hopkins</u> Title: <u>Manager Member Owner</u>																																				

Issued 08/28/2017 by online