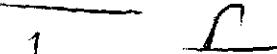
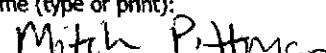


No. W 100544	Reinstatement Annual Report Form ADMIN DISSOLVED 05/14/2014			2. Registered Agent and Office (NOT A P.O. BOX) MITCHEL PITTMANN 4919 NW 1ST AVE NEW PLYMOUTH ID 83655		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. PITTMAN RANCHES, LLC MITCHEL PITTMANN 4919 NW 1ST AVE NEW PLYMOUTH ID 83655			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 <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Mitch Pittman 4919 NW 1 st Ave New Plymouth ID US 83655					
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Jody Pittman 4919 NW 1 st Ave New Plymouth ID US					
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of:		6.				
IDAHO W 100544		Signature:  Name (type or print): 				
		Date: 12/28/16 Title:				

Issued 12/15/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM