

No. W 23265	Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2007		2. Registered Agent and Office (NOT A P.O. BOX)																						
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BAR V RANCH, LLC PO BOX 2106 HAYDEN ID 83835-2106		ROBERT W VERNON 10212 TARYNE ST HAYDEN ID 83835-2106																						
			3. <u>New</u> Registered Agent Signature. <i>Robert W. Vernon</i>																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</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</td> <td>Robert W. VERNON</td> <td>P.O. Box 2106</td> <td>Hayden ID</td> <td>US</td> <td></td> <td>83835</td> </tr> <tr> <td>Manager</td> <td>Rita Vernon</td> <td>" "</td> <td>" "</td> <td>" "</td> <td></td> <td></td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Manager	Robert W. VERNON	P.O. Box 2106	Hayden ID	US		83835	Manager	Rita Vernon	" "	" "	" "		
Office Held	Name	Street or PO Address	City	State	Country	Postal Code																			
Manager	Robert W. VERNON	P.O. Box 2106	Hayden ID	US		83835																			
Manager	Rita Vernon	" "	" "	" "																					
5. Organized Under the Laws of: IDAHO W 23265		6. Signature: <i>Robert W. Vernon</i> Name (type or print): Robert W. VERNON			Date: <i>6/15/10</i> Title: <i>Mgr.</i> <i>owner</i>																				
Issued 06/10/2010 by PEH																									