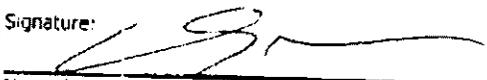


<p>No. W 106444</p>	<p align="center">Reinstatement Annual Report Form ADMIN DISSOLVED 12/04/2012</p>		<p>2. Registered Agent and Office (NOT A P.O. BOX)</p>																																			
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p>	<p>1. Mailing Address: Correct in this box if needed. FALCKCO, LLC LEVI FALCK PO BOX 353 <i>509977 Hwy 95</i> BONNERS FERRY ID 83805</p>		<p>LEVI FALCK 509977 HWY 95 BONNERS FERRY ID 83805</p>																																			
<p>REINSTATEMENT FEE DUE: \$30.00</p>			<p>3. <u>New</u> Registered Agent Signature.</p>																																			
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <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 checked="" type="checkbox"/></td> <td>Levi Falck</td> <td>509977 Hwy 95</td> <td>Bonnors Ferry</td> <td>ID</td> <td></td> <td>83805</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 checked="" type="checkbox"/>	Levi Falck	509977 Hwy 95	Bonnors Ferry	ID		83805	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p>5. Organized Under the Laws of: IDAHO W 106444</p>	<p>6. Signature:  Name (type or print): <u>Levi Falck</u></p>		<p>Date: <u>10-8-13</u> Title: <u>Member</u></p>																																			
<p>Issued 10/08/2013 by DK1</p>																																						