

No. W 119276	Reinstatement Annual Report Form		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. OHANA PROPERTIES OF TWIN FALLS, LLC 319 1406 WRANGLER ST 1406 Wrangler ST TWIN FALLS ID 83301		1406 WRANGLER ST Bridger Smith 319 1406 WRANGLER ST 1406 Wrangler ST TWIN FALLS ID 83301																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Ralph Chapman</td> <td>732 Twin view DRIVE</td> <td>Honolulu,</td> <td>HI</td> <td></td> <td>96817</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Pauline Chapman</td> <td>732 Twin view DRIVE</td> <td>Honolulu,</td> <td>HI</td> <td></td> <td>96817</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Ralph Chapman	732 Twin view DRIVE	Honolulu,	HI		96817	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Pauline Chapman	732 Twin view DRIVE	Honolulu,	HI		96817	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							3. New Registered Agent Signature. <i>Bridger Smith</i>
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5. Organized Under the Laws of: IDAHO W 119276	6. Signature: <i>R. S. Chapman</i> Name (type or print): Ralph Chapman		Date: 2/26/2014 Title: president																																			
Issued 02/26/2014 by online																																						