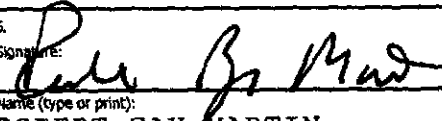


No. W 48298	Reinstatement Annual Report Form ADMIN DISSOLVED 06/17/2014		2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. ROBERT ZAY MARTIN FARMS, L.L.C. ZAY MARTIN 807 W 300 N BLACKFOOT ID 83221		ROBERT ZAY MARTIN 807 W 300 N BLACKFOOT ID 83221
REINSTATEMENT FEE DUE: \$30.00			3. New Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member	Name	Street or PO Address	City State Country Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	ROBERT ZAY MARTIN	807 W 300 N	BLACKFOOT, ID 83221
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 <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:	6.		
IDAHO	Signature: 		
W 48298	Date: 7-3-14		
	Name (type or print): ROBERT ZAY MARTIN		
	Title: MEMBER		

Issued 07/02/2014 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM