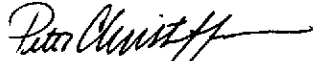



No. W 30233	Reinstatement Annual Report Form ADMIN DISSOLVED 08/31/2017		2. Registered Agent and Office (NOT A P.O. BOX) Need to Appoint Peter D. Christofferson 1000 Riverwalk Dr., Suite 200 Idaho Falls, ID 83402																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. WALKER LAND & CATTLE, LLC DUSTIN SCOTT 1070 RIVERWALK DR STE 200 IDAHO FALLS ID 83402		3. <u>New</u> Registered Agent Signature. 																																			
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>Roland Walker</td> <td>1070 Riverwalk Dr, Ste 200, Idaho Falls, ID</td> <td>USA</td> <td></td> <td></td> <td>83402</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Roland Walker	1070 Riverwalk Dr, Ste 200, Idaho Falls, ID	USA			83402	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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5. Organized Under the Laws of: IDAHO W 30233	6. Signature:  Name (type or print): Roland Walker Date: 9/22/17 Title: Manager																																					

FILED

Issued 09/15/2017 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM