

No. W 125872 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014 1. Mailing Address: Correct in this box if needed. RIVER EDGE LAND COMPANY, LLC PO BOX 767 128 RUPERT ID 83350 Burley Idaho 83318	2. Registered Agent and Office (NOT A P.O. BOX) GARRETT DEWSNUP Wynn Dewsnup 1159 E 800 N 665 Bedke Blvd. JACKSON ID 83350 Burley Idaho 83318 3. New Registered Agent Signature. Wynn Dewsnup																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Wynn Dewsnup</td> <td>665 Bedke Blvd</td> <td>Burley Id</td> <td>Cassia</td> <td></td> <td>83318</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"/>	Wynn Dewsnup	665 Bedke Blvd	Burley Id	Cassia		83318	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: <div style="text-align: center;"> IDAHO W 125872 </div>	6. Signature: <u>Wynn Dewsnup</u> Date: <u>8-12-16</u> Name (type or print): <u>Wynn R Dewsnup</u> Title: <u>Member</u>																																				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM