

No. W 6759	Reinstatement Annual Report Form ADMIN DISSOLVED 11/03/2011		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. IDAHO OUTDOOR WILDERNESS ADVENTURES, LLC DARWIN J VANDER ESCH PO BOX 1483 1454 RIGGINS ID 83549		DARWIN J VANDER ESCH RACE CREEK HOUSE #1 RIGGINS ID 83549	
REINSTATEMENT FEE DUE: \$30.00			3. <u>New</u> 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 Member (circle one)				
	DARWIN J. VANDER ESCH, MEMBER	P.O. BOX 1454	RIGGINS ID	USA 83549
5. Organized Under the Laws of: IDAHO W 6759		6. Signature: <u><i>Darwin J. Vander Esch</i></u> Date: <u>3/13/12</u> Name (type or print): <u>Darwin J. Vander Esch</u> Title: <u>Member</u>		
Issued 12/28/2011 by 1.1				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 4 - Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the