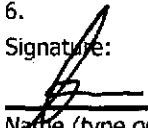


No. W 128544	Reinstatement Annual Report Form ADMIN DISSOLVED 11/30/2017		2. Registered Agent and Office (NOT A P.O. BOX) ALLAN G. BRANDVEIN 580 CAPSTONE COURT HAYDEN ID 83835																												
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. SAFE HARBOR WEALTH ADVISORY, LLC ALLAN G BRANDVEIN 580 CAPSTONE COURT HAYDEN ID 83835		3. <u>New</u> Registered Agent Signature.																												
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																															
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																					
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<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;"> Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> </td> <td style="width: 25%;"> ALLAN BRANDVEIN </td> <td style="width: 25%;"> 580 CAPSTONE CT </td> <td style="width: 10%;"> HAYDEN </td> <td style="width: 10%;"> ID </td> <td style="width: 10%;"> US </td> <td style="width: 15%;"> 83835 </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> </table>				Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	ALLAN BRANDVEIN	580 CAPSTONE CT	HAYDEN	ID	US	83835	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; font-size: 1.2em;"> IDAHO W 128544 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature:  Name (type or print): ALLAN BRANDVEIN </div> <div style="width: 35%;"> Date: 1/13/18 Title: MANAGER </div> </div>																													

Issued 01/12/2018 by online