

No. W 93118 Reinstatement Annual Report Form ADMIN DISSOLVED 08/10/2011		2. Registered Agent and Office (NOT A P.O. BOX) MARK DEYO 361 RODEO DR OROFINO ID 83544													
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. MARK DEYO, LLC PO BOX 1979 OROFINO ID 83544													
3. New 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 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"/> (circle one) Mark Deyo </td> <td>P.O. Box 1979</td> <td>Orofino</td> <td>Id.</td> <td>USA</td> <td>83544</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"/> (circle one) Mark Deyo	P.O. Box 1979	Orofino	Id.	USA	83544
Manager or Member Name	Street or PO Address	City	State	Country	Postal Code										
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> (circle one) Mark Deyo	P.O. Box 1979	Orofino	Id.	USA	83544										
5. Organized Under the Laws of: IDAHO W 93118		6. Signature: <i>Mark Deyo</i> Date: <i>10/31/11</i> Name (type or print): <i>Mark Deyo</i> Title: <i>Owner</i>													
Issued 10/31/2011 by SLD															