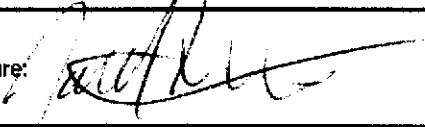


No. W 115461 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 11/15/2016 1. Mailing Address: Correct in this box if needed. LIBERTY CONTRACTING CO. LLC JARED RAY 5577 E SUGARCREEK RD PRESTON ID 83263	2. Registered Agent and Office (NOT A P.O. BOX) JARED A RAY 5577 E SUGARCREEK RD PRESTON ID 83263 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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>JARED RAY</td> <td>5577 E SUGARCREEK RD</td> <td>PRESTON</td> <td>ID</td> <td></td> <td>83263</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>JENNIFER RAY</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"/>	JARED RAY	5577 E SUGARCREEK RD	PRESTON	ID		83263	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	JENNIFER RAY	//	//	//	//	//	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 115461	6. Signature:  Date: <u>7/19/18</u> Name (type or print): <u>JARED RAY</u> Title: <u>MEMBER</u>																																				

Issued 07/19/2018 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the