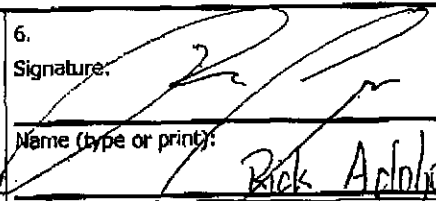


No. W 71435	Reinstatement Annual Report Form ADMIN DISSOLVED 05/25/2016		2. Registered Agent and Office (NOT A P.O. BOX)																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ADOLPHO ENTERPRISE, LLC RICK ADOLPHO 2235 E 25TH ST STE 190 IDAHO FALLS ID 83404 121 E. 39th St Ste. A Garden City, ID 83714		RICK ADOLPHO 1815 E. SERCHIO CT MERIDIAN ID 83642 121 E. 39th St. Ste A. Garden City, ID 83714 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</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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Rick Adolpho</td> <td>121 E. 39th St Ste. A.</td> <td>Garden City,</td> <td>ID</td> <td></td> <td>83714</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Rick Adolpho	121 E. 39th St Ste. A.	Garden City,	ID		83714	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: IDAHO W 71435		6. Signature:  Date: 6-16-16 Name (type or print): Rick Adolpho Title: Owner/Manager																																				
Issued 06/16/2016 by online																																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM