

FILED EFFECTIVE

REINSTATEMENT

No. W 28012	Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																															
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	ADMIN DISSOLVED 04/10/2006 1. Mailing Address: Correct in this box if applicable ARAVE LIVESTOCK, LLC 1395 NW MAIN BLACKFOOT, ID 83221		JARED K. ARAVE <i>Gordon Arave</i> 1395 NW MAIN BLACKFOOT, ID 83221 3. New registered agent signature <i>Gordon Arave</i>																															
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td><i>Owner/Manager</i></td> <td>Jared Arave</td> <td>1395 NW Main</td> <td>Blackfoot</td> <td>ID.</td> <td>83221</td> </tr> <tr> <td><i>Owner/Manager</i></td> <td>Gordon Arave</td> <td>1395 NW Main</td> <td>Blackfoot</td> <td>ID.</td> <td>83221</td> </tr> <tr> <td><i>Sec/owner</i></td> <td>Ben Arave</td> <td>" " "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td><i>Part/owner</i></td> <td>Clint Arave</td> <td>" " "</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	<i>Owner/Manager</i>	Jared Arave	1395 NW Main	Blackfoot	ID.	83221	<i>Owner/Manager</i>	Gordon Arave	1395 NW Main	Blackfoot	ID.	83221	<i>Sec/owner</i>	Ben Arave	" " "	"	"	"	<i>Part/owner</i>	Clint Arave	" " "	"	"	"
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5. Organized under the laws of: IDAHO W 28012		6. Signature <i>Gordon Arave</i> Name (Typed or Printed) <i>Gordon Arave</i> Title <i>Owner/Manager</i>																																