No. W 105405	Reinstatement Annual Report Form ADMIN DISSOLVED 10/04/2012	2. Registered Agent and Office (NOT A P.O. BOX) BRADLEY VAL KOSTER 560 10TH ST IDAHO FALLS ID 83404
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. ROCK BOTTOM LLC 560 10TH ST IDAHO FALLS ID 83404	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager [X] Member [X]	Bradley Val Koster	560 10th St	Idaho Falls	ID	US	83404
Manager [ ] Member [ ]						
Manager [ ] Member [ ]						
Manager [ ] Member [ ]						

5. Organized Under the Laws of:	6.
IDAHO W 105405	Signature: [signature] Date: 11-28-12 Name (type or print): Bradley Val Koster Title: Owner/manager

Issued 11/26/2012 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM