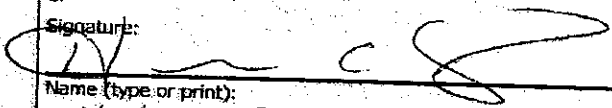
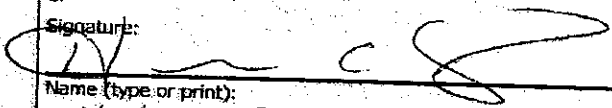
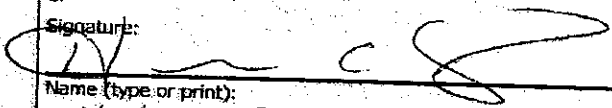


W 87860

<http://www.sos.idaho.gov/CorpPrintForm/display.aspx?enum=w8786...>

No. W 87860		Reinstatement Annual Report Form		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		ADMIN DISSOLVED 01/25/2016		HELEN CATHERINE GOMEZ 4270 BROME ST IDAHO FALLS ID 83401																																				
REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. ADVANCE ALERT, LLC HELEN C GOMEZ 4270 BROME ST IDAHO FALLS ID 83401		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 ☒ Member ☐</td><td>Helen Gomez</td><td>4270 Brome St</td><td>Idaho Falls</td><td>ID</td><td>U.S.</td><td>83401</td></tr><tr><td>Manager ☐ Member ☐</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager ☐ Member ☐</td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager ☐ Member ☐</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 ☒ Member ☐	Helen Gomez	4270 Brome St	Idaho Falls	ID	U.S.	83401	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐						
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