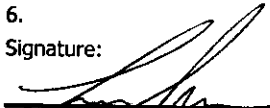


No. W 90662 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 05/10/2013 1. Mailing Address: Correct in this box if needed. M INSTALLS LLC LANE W MORRISON 1516 BONNEVILLE CT NAMPA ID 83686	2. Registered Agent and Office (NOT A P.O. BOX) NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. <u>New</u> Registered Agent Signature.																																
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																		
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Lane W. Morrison</td> <td rowspan="4" style="vertical-align: middle; text-align: center;"> <i>} same as</i> </td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td>Janice T. Morrison</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> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></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"/>	Lane W. Morrison	<i>} same as</i>					Manager <input type="checkbox"/> Member <input type="checkbox"/>	Janice T. Morrison					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: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 90662 </div>	6. Signature:  <hr/> Name (type or print): <u>Lane Morrison</u> <div style="display: flex; justify-content: space-between;"> <div> Date: <u>Sept 12, 2013</u> Title: <u>co owner</u> </div> </div>																																	
Issued 09/12/2013 by JL1																																		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM