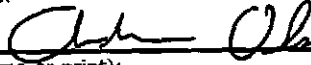


No. W 52425 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 10/27/2017	2. Registered Agent and Office (NOT A P.O. BOX) ANDREAS OLSON 431 MAIN ST WARDNER ID 83837 4107 Nez Perce Rd. Couer d' Alene ID. 83815 3. <u>New</u> Registered Agent Signature.																																			
1. Mailing Address: Correct in this box if needed. ASCENT LLC ANDREAS OLSON PO BOX 1265 COEUR D'ALENE ID 83816 4107 Nez Perce Rd. Couer d' Alene ID. 83815																																					
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="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Casey Ramsey</td> <td>4107 Nez Perce Rd.</td> <td>Couer d' Alene ID.</td> <td>Kootenai</td> <td></td> <td>83815</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Andreas Olson</td> <td>9251 Fern Creek Rd.</td> <td>Cataldo ID.</td> <td>Kootenai</td> <td></td> <td>83815</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Alex Jafari</td> <td>20 Bayard Street Apt. 5E</td> <td>Brooklyn NY.</td> <td></td> <td></td> <td>11211</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Casey Ramsey	4107 Nez Perce Rd.	Couer d' Alene ID.	Kootenai		83815	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Andreas Olson	9251 Fern Creek Rd.	Cataldo ID.	Kootenai		83815	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Alex Jafari	20 Bayard Street Apt. 5E	Brooklyn NY.			11211	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 52425</div>	6. Signature:  Name (type or print): <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Andreas Olson</div>																																				
		Date: <div style="border-bottom: 1px solid black; padding-bottom: 2px;">6/15/2018</div> Title: <div style="border-bottom: 1px solid black; padding-bottom: 2px;">Owner/Operator</div>																																			
Issued 06/15/2018 by online																																					