

No. W 12025	Reinstatement Annual Report Form ADMIN DISSOLVED 08/10/2011					
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. NORTH AMERICAN ORION LLC DENTON HARRIS 2807 E 3200 S FRANKLIN ID 83237 USA					
REINSTATEMENT FEE DUE: \$30.00	2. Registered Agent and Office (NOT A P.O. BOX) DENTON HARRIS 1405 W 800 N PRESTON ID 83263					
3. New Registered Agent Signature.						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Name Denton Harris	Street or PO Address 2807 E 3200 S	City Franklin	State ID	Country USA	Postal Code 83237
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of: IDAHO W 12025		6. Signature: Denton Harris Name (type or print): Denton Harris				
		Date: 8-6-13 Title: Manager				

Issued 08/06/2013 by KAH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM