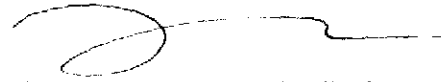
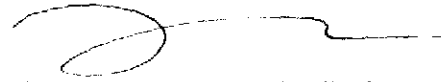
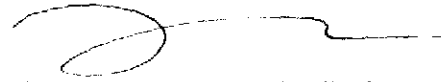


No. <b>W 132137</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 03/30/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> BRIAN TODD 1030 REAMS RD MOSCOW ID 83843																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> CLARKSTON LOCK & LEAVE LLC 316 N MAIN ST MOSCOW ID 83843		3. <u>New</u> Registered Agent Signature.																																			
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <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 <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>BRIAN TODD</td> <td>1030 REAMS Rd</td> <td>MOSCOW</td> <td>ID</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> <td></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> <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> <p style="text-align: right; margin-right: 50px;">Latah, 83843</p>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	BRIAN TODD	1030 REAMS Rd	MOSCOW	ID			Manager <input type="checkbox"/> Member <input type="checkbox"/>							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:  <b>IDAHO W 132137</b>		6. <table border="1"> <tr> <td>Signature: </td> <td>Date: 9/23/15</td> </tr> <tr> <td>Name (type or print): <u>Brian Todd</u></td> <td>Title: <u>OWNER</u></td> </tr> </table>		Signature: 	Date: 9/23/15	Name (type or print): <u>Brian Todd</u>	Title: <u>OWNER</u>																															
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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**