

No. W 182367	Reinstatement Annual Report Form ADMIN DISSOLVED 07/23/2018		2. Registered Agent and Office (NOT A P.O. BOX) UNITED STATES CORPORATION AGEN 800 W MAIN ST STE 1460 BOISE ID 83702 USA																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. INDIAN SPRINGS LAND RESORT, LLC DAVID DIEFFENBACH 3249 INDIAN SPRINGS RD AMERICAN FALLS ID 83211																																					
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 <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>David W. Dieffenbach</td> <td>3249 Indian Springs Rd</td> <td>American Falls</td> <td>ID</td> <td>83211</td> <td>USA</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Michaela M. R. Dieffenbach</td> <td>3249 Indian Springs Rd.</td> <td>American Falls</td> <td>ID</td> <td>83211</td> <td>USA</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>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	David W. Dieffenbach	3249 Indian Springs Rd	American Falls	ID	83211	USA	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Michaela M. R. Dieffenbach	3249 Indian Springs Rd.	American Falls	ID	83211	USA	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							3. <u>New</u> Registered Agent Signature.
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5. Organized Under the Laws of: IDAHO W 182367		6. Signature: <u>Michaela Dieffenbach</u> Date: <u>09/20/2018</u> Name (type or print): <u>Michaela Dieffenbach</u> Title: <u>Manager</u>																																				

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