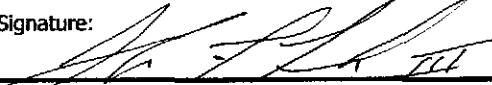


No. <b>W 163113</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/29/2018</b>  1. <b>Mailing Address: Correct in this box if needed.</b> TURTLE SHELL TUFF LLC JOHN F FILON III 698 LEITCH CREEK RD KOOSKIA ID 83539	2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JOHN F FILON III 698 LEITCH CREEK RD KOOSKIA ID 83539-8353  3. <u>New</u> Registered Agent Signature.																																			
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>John F. Filon III</td> <td>698 Leitch Creek Road</td> <td>Kooskia</td> <td>Id</td> <td>Id</td> <td>83539</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>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	John F. Filon III	698 Leitch Creek Road	Kooskia	Id	Id	83539	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</b> <b>W 163113</b>	6. Signature:  Date: <u>07-17-18</u> Name (type or print): <u>John F. Filon III</u> Title: <u>Owner</u>																																				

Issued 07/17/2018 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**