

FILED

| No. W 158218 | Reinstatement Annual Report Form ADMIN DISSOLVED 02/24/2017 | | 2. Registered Agent and Office (NOT A P.O. BOX) MISTY HAYES MCCLANAHAN 2101 SATTERFIELD DR POCATELLO ID 83201 <i>X</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|-------------------|-------------------------------|----------------------|----------------|------------------------------|-------------------------------|---------------|---|---------------------|------------------|------------|-----|-----|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 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. ARTIUS CONSULTING, LLC MISTY HAYES MCCLANAHAN 2101 SATTERFIELD DR <i>X</i> POCATELLO ID 83201 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>Misty H. McClanahan</td><td>2101 Satterfield</td><td>Pocatello,</td><td>ID,</td><td>USA</td><td>83201</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 type="checkbox"/> Member <input checked="" type="checkbox"/> | Misty H. McClanahan | 2101 Satterfield | Pocatello, | ID, | USA | 83201 | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | | Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> | Misty H. McClanahan | 2101 Satterfield | Pocatello, | ID, | USA | 83201 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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 158218 | | 6. <table><tr><td>Signature:</td><td><i>Misty Hayes McClanahan</i></td><td>Date:</td><td><i>4-13-17</i></td></tr><tr><td>Name (type or print):</td><td><i>Misty Hayes McClanahan</i></td><td>Title:</td><td><i>Manager/Member</i></td></tr></table> | | Signature: | <i>Misty Hayes McClanahan</i> | Date: | <i>4-13-17</i> | Name (type or print): | <i>Misty Hayes McClanahan</i> | Title: | <i>Manager/Member</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature: | <i>Misty Hayes McClanahan</i> | Date: | <i>4-13-17</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name (type or print): | <i>Misty Hayes McClanahan</i> | Title: | <i>Manager/Member</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Issued 04/13/2017 by online | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |