

No. <b>W 41711</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 11/14/2012</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MICHAEL ASKER 104 SOUTH A ST GRANGEVILLE ID 83530																																			
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>	1. <b>Mailing Address: Correct in this box if needed.</b> RED RIVER PROPERTIES, LLC MIKE ASKER 104 SOUTH A STREET GRANGEVILLE ID 83530 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 35%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Adolphus A. Bush IV</td> <td>1600 Hwy 29</td> <td>OFallon</td> <td>MO</td> <td>USA</td> <td>63366</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Michael W. ASKER</td> <td>104 S.A.</td> <td>Grangeville</td> <td>ID</td> <td>USA</td> <td>83530</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Peter von Gontard</td> <td>1 city center</td> <td>15th Fl.</td> <td>St. Louis</td> <td>MO</td> <td>63101</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"/>	Adolphus A. Bush IV	1600 Hwy 29	OFallon	MO	USA	63366	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Michael W. ASKER	104 S.A.	Grangeville	ID	USA	83530	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Peter von Gontard	1 city center	15th Fl.	St. Louis	MO	63101	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold;">IDAHO W 41711</div>		6. Signature: <u>Michael W. Asker</u> Name (type or print): <u>Michael W. Asker</u> <div style="float: right; text-align: right;">           Date: <u>7/21/16</u>            Title: <u>member.</u> </div>																																				
Issued 07/21/2016 by online																																						