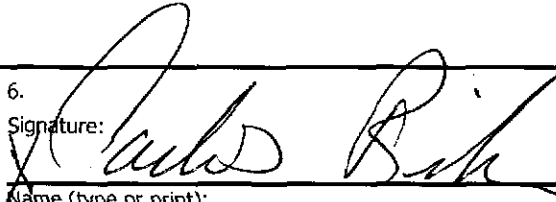


No. <b>W 133401</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 04/30/2018</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> CARLOS M RIBERA 500 E COMMERCIAL ST WEISER ID 83672																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. LEGENDS ON MAIN LLC CARLOS M RIBERA 500 E COMMERCIAL ST WEISER ID 83672		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>Carlos Ribera</td> <td>500 E Commercial St</td> <td>Weiser</td> <td>ID</td> <td>WASH.</td> <td>83672</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Lora Ribera</td> <td>500 E Commercial St</td> <td>Weiser</td> <td>ID</td> <td>WASH.</td> <td>83672</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"/>	Carlos Ribera	500 E Commercial St	Weiser	ID	WASH.	83672	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Lora Ribera	500 E Commercial St	Weiser	ID	WASH.	83672	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 133401</b>	6. Signature:  Name (type or print): <u>Carlos Ribera</u>		Date: <u>5-18-18</u> Title: <u>Owner</u>																																			

Issued 05/09/2018 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT**