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FILED EFFECTIVE

No. W 29053 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Reinstatement Annual Report Form ADMIN DISSOLVED 06/04/2009 1. Mailing Address: Correct in this box if needed. V3, LLC PO BOX 840 KETCHUM ID 83340		2. Registered Agent and Office (NOT A P.O. BOX) 30HN L BUNCE JR 675 SUN VALLEY RD #N KETCHUM ID 83340 3. New Registered Agent Signature.				
reinstatement per due: \$30.00							. 1
4. Limited Liability Companie Office Held Nam	Enter Names and Ade	idresses of Managers OR Members. Street or PO Address	City	State	Country	Postai C	'ode
Juse J3	ع ندی س	B0~ 870	Ka tch		USA	*33	2
IDAHO W 29053	of: 6, Signature: Name (type o	SUBMY or print): John Bu	e c			1-19-1 Our	
ssued 01/19/2010 by PEH							

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a many registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. Note: <u>Do not put "same as last year" or "same as above".</u>

These will not be accepted,

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.