


No. <b>C 51428</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JULIE LEATHERS 3125 E 49TH N IDAHO FALLS ID 83401														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> START SPECIALISTS, INC. JULIE LEATHERS PO BOX 2282 IDAHO FALLS ID 83403																
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</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>President</td> <td>Julie Leathers</td> <td>544 N 4000 E</td> <td>Ripley</td> <td>Id</td> <td>USA</td> <td>83442</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Julie Leathers	544 N 4000 E	Ripley	Id	USA	83442	3. <u>New</u> Registered Agent Signature.
			Office Held	Name	Street or PO Address	City	State	Country	Postal Code								
President	Julie Leathers	544 N 4000 E	Ripley	Id	USA	83442											
5. Organized Under the Laws of:  <b>IDAHO C 51428</b>	6. Signature:  Name (type or print): <u>Julie Leathers</u> Date: <u>9/12/14</u> Title: <u>Pres</u>																

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**