

No. W 98961		Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2013			2. Registered Agent and Office (NOT A P.O. BOX) ANTHONY L ADAMS 6722 HILLVIEW RD EMMETT ID 83617		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. OSTIQUE LLC ANTHONY L ADAMS 6722 HILLVIEW RD EMMETT ID 83617			3. New Registered Agent Signature.		
REINSTATEMENT FEE DUE: \$30.00							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager or Member		Name		Street or PO Address	City	State	Country
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> ANTHONY L. ADAMS				6722 HILLVIEW RD - EMMETT		ID	83617
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:				6.			
IDAHO W 98961				Signature:  Name (type or print): ANTHONY L. ADAMS			
				Date: 3-14-13 Title: MEMBER			
Issued 03/14/2013 by JL1							