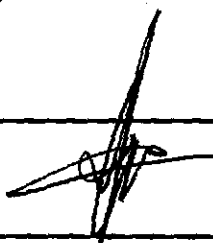


No. <b>W 126749</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 10/27/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> LUBOMIR PEICHEV 2460 W BOLIVAR AVE COEUR D'ALENE ID 83815 <b>615 N SPOKANE STREET</b> <b>POST FALLS ID 83854</b>																																			
Return 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> HUNTER'S EATERY, LLC GEORGE <b>PEICHEV</b> 2460 W BOLIVAR AVE COEUR D'ALENE ID 83815 <b>615 N SPOKANE STREET</b> <b>POST FALLS ID 83854</b>		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td><b>GEORGE PEICHEV</b></td> <td><b>615 N SPOKANE ST</b></td> <td><b>POST FALLS</b></td> <td><b>ID</b></td> <td><b>83854</b></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> <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 type="checkbox"/> Member <input checked="" type="checkbox"/>	<b>GEORGE PEICHEV</b>	<b>615 N SPOKANE ST</b>	<b>POST FALLS</b>	<b>ID</b>	<b>83854</b>		Manager <input type="checkbox"/> Member <input type="checkbox"/>							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:  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 126749</b> </div>		6. Signature:   Name (type or print): <u><b>George Peichev</b></u>  Date: <u><b>12/18/2017</b></u> Title: <u><b>OWNER</b></u>																																				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM