

No. W 89485	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012		2. Registered Agent and Office (NOT A P.O. BOX) KAREN T BOTAI 31 W HAYDEN AVE HAYDEN ID 83835																																			
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. AZURE SALON LLC KAREN T BOTAI 31 W HAYDEN AVE <i>31 W. Honey Suckle Ave</i> HAYDEN ID 83835 USA		3. <u>New</u> Registered Agent Signature.																																			
REINSTATEMENT FEE DUE: \$30.00																																						
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: 20%;">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: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Robert Botai</td> <td>P.O. Box 882</td> <td>Emtlen</td> <td>ID</td> <td>Kootenai</td> <td>83858</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Rachelle Bush</td> <td>P.O. Box 882</td> <td>Rothdram</td> <td>ID</td> <td>Kootenai</td> <td>83858</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td>Karen Botai</td> <td>P.O. Box 882</td> <td>Rothdram</td> <td>ID</td> <td>Kootenai</td> <td>83858</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"/>	Robert Botai	P.O. Box 882	Emtlen	ID	Kootenai	83858	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Rachelle Bush	P.O. Box 882	Rothdram	ID	Kootenai	83858	Manager <input type="checkbox"/> Member <input type="checkbox"/>	Karen Botai	P.O. Box 882	Rothdram	ID	Kootenai	83858	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 89485</div>	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;"> Signature: </td> <td style="width: 40%;"> Date: 5/25/12 </td> </tr> <tr> <td> Name (type or print): Robert Botai </td> <td> Title: Manager </td> </tr> </table>			Signature: 	Date: 5/25/12	Name (type or print): Robert Botai	Title: Manager																															
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing 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.**