

No. C 149077	Reinstatement Annual Report Form ADMIN DISSOLVED 08/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) JOSHUA E HOWA 1508 S BROOKLAWN DR BOISE ID 83709														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. HOWA DESIGN, INC. JOSHUA E HOWA 12777 W BERGHAN ST BOISE ID 83709 USA																
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>PRES/DIRECTOR</td> <td>JOSHUA E HOWA</td> <td>12777 W BERGHAN ST</td> <td>BOISE</td> <td>ID</td> <td>USA</td> <td>83709</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRES/DIRECTOR	JOSHUA E HOWA	12777 W BERGHAN ST	BOISE	ID	USA	83709	3. New Registered Agent Signature.
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
PRES/DIRECTOR	JOSHUA E HOWA	12777 W BERGHAN ST	BOISE	ID	USA	83709											
5. Organized Under the Laws of: IDAHO C 149077	6. Signature  X Name (type or print): JOSHUA E. HOWA			Date: X 10/22/13 Title: PRES.													

Issued 07/25/2013 by J.L

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM