




No. W 101109	Reinstatement Annual Report Form ADMIN DISSOLVED 06/17/2014		2. Registered Agent and Office (NOT A P.O. BOX) JILL WATTERSON 12601 NEW HOPE RD STAR ID 83669 6725 W. Dry Creek Road Boise, ID 83714
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. WATTERSON VENTURES LLC JOE WATTERSON 12601 NEW HOPE RD 6725 W. Dry Creek Rd STAR ID 83669 Boise, ID 83714		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.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Jill Watterson	6725 W. Dry Creek Rd,	Boise,	ID	US	83714
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Joe Watterson	6725 W. Dry Creek Road,	Boise,	ID,	US	83714
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-size: 1.2em;">W 101109</div>	<table style="width: 100%;"> <tr> <td style="width: 60%;"> 6. Signature:  <hr/> Name (type or print): Jill Watterson </td> <td style="width: 40%;"> Date: 8/10/15 <hr/> Title: Manager </td> </tr> </table>	6. Signature:  <hr/> Name (type or print): Jill Watterson	Date: 8/10/15 <hr/> Title: Manager
6. Signature:  <hr/> Name (type or print): Jill Watterson	Date: 8/10/15 <hr/> Title: Manager		

Issued 08/10/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM