


<b>No. W 150807</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>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 07/26/2017</b>  <b>1. Mailing Address: Correct in this box if needed.</b> H&S COMMODITIES LLC PO BOX 1312 DRIGGS ID 83422	<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> BLAKE HARE 285 E LITTLE AVE A DRIGGS ID 83422  <b>3. <u>New</u> Registered Agent Signature.</b>
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>		
Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code		
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <u>Blake Hare</u> <u>285 E. Lothe Ave</u> <u>Driggs</u> <u>ID</u> <u>US</u> <u>83422</u>		
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <u>Dustin Johnson</u> <u>203 Pine View Dr.</u> <u>Moore, SC</u> <u>US</u> <u>29369</u>		
Manager <input type="checkbox"/> Member <input type="checkbox"/>		
Manager <input type="checkbox"/> Member <input type="checkbox"/>		
<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-weight: bold; font-size: large;">             IDAHO W 150807           </div>	<b>6.</b> Signature:  <hr/> Name (type or print): <u>Blake Hare</u> <hr/> <div style="display: flex; justify-content: space-between;"> <div> <b>Date:</b> <u>8/11/17</u>  <b>Title:</b> <u>Member</u> </div> </div>	

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**