No. W 147749	Reinstatement Annual Report Form ADMIN DISSOLVED 05/25/2016	2. Registered Agent and Office (NOT A P.O. BOX) MEREDITH A BAKULA 2645 N FORK RIDGE RD COUNCIL ID 83612
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. TWISTED PINE TRAINING, LLC MEREDITH A BAKULA PO BOX 408 COUNCIL ID 83612	
REINSTATEMENT FEE DUE: \$30.00		3. <u>New</u> Registered Agent Signature.
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 Member		
5. Organized Under the La IDAHO W 147749	Name (type or print): Meredith A Bakula	Date: 2-20-18 Title: Dwn 05
Issued 02/20/2018 by online 7		

INCTPLICTIONS FOR THE IDAHO ANNUAL REPORT FORM