

No. W 27472	Reinstatement Annual Report Form ADMIN DISSOLVED 03/08/2011		2. Registered Agent and Office (NOT A P.O. BOX) SHANNON HAMRICK 2063 W JAYTON DR MERIDIAN ID 83642														
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. FLOW AQUATICS, LLC SHANNON HAMRICK 2063 W. JAYTON DR MERIDIAN ID 83642				3. New Registered Agent Signature.												
	4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"><thead><tr><th>Manager or Member</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>☒ Manager ☐ Member (circle one)</td><td colspan="6">Shannon Hamrick 2063 W. Jayton Dr Meridian ID 83642</td></tr></tbody></table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	☒ Manager ☐ Member (circle one)	Shannon Hamrick 2063 W. Jayton Dr Meridian ID 83642				
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code											
☒ Manager ☐ Member (circle one)	Shannon Hamrick 2063 W. Jayton Dr Meridian ID 83642																
5. Organized Under the Laws of: IDAHO W 27472		6. <table border="1"><tr><td>Signature: </td><td>Date: 3/16/11</td></tr><tr><td>Name (type or print): Shannon Hamrick</td><td>Title: Owner</td></tr></table>			Signature: 	Date: 3/16/11	Name (type or print): Shannon Hamrick	Title: Owner									
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Issued 03/16/2011 by CLH																	