


No. W 107646	Reinstatement Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) MARK SCOTT 1983 E LOOKOUT DR COEUR D ALENE ID 83815																																			
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. MARK SCOTT LLC MARK E SCOTT 1983 E LOOKOUT DR COEUR D ALENE ID 83815		3. <u>New</u> 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 <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>MARK SCOTT</td> <td>1983 E LOOKOUT</td> <td>CDA</td> <td>ID</td> <td>USA</td> <td>83815</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Jayne Shoda</td> <td>1983 Ellookout dr</td> <td>CDA</td> <td>ID</td> <td>USA</td> <td>83815</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	MARK SCOTT	1983 E LOOKOUT	CDA	ID	USA	83815	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Jayne Shoda	1983 Ellookout dr	CDA	ID	USA	83815	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 107646	6. Signature:  Date: 23 JAN 14 Name (type or print): MARK SCOTT Title: Manager																																					

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM