

No. <b>W 82320</b>	Reinstatement Annual Report Form <b>ADMIN DISSOLVED 06/08/2010</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MARGARET <del>REID</del> LAKE 6116 EDGEWATER DR 814 Balsam St BOISE ID 83709 Boise, ID 83706																																			
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>	1. <b>Mailing Address: Correct in this box if needed.</b> ARTISAN HOME RENOVATIONS, LLC 6116 EDGEWATER DR BOISE ID 83709		3. <u>New</u> Registered Agent Signature. <i>Margaret Lake</i>																																			
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 checked="" type="checkbox"/></td> <td>Margaret Lake</td> <td>814 Balsam St</td> <td>Boise</td> <td>ID</td> <td>US</td> <td>83706</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> <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 checked="" type="checkbox"/>	Margaret Lake	814 Balsam St	Boise	ID	US	83706	Manager <input type="checkbox"/> Member <input type="checkbox"/>							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:  <b>IDAHO</b> <b>W 82320</b>	6. Signature: <i>Margaret Lake</i> Date: <u>10/16/13</u> Name (type or print): <u>Margaret Lake</u> Title: <u>man/mem</u> <u>owner</u>																																					
Issued 10/16/2013 by DK1																																						

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**