Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  REINSTATEMENT FEE DUE: \$30.00  4. Limited Liability Companies: Enter Names and Addresses of Manager Member Manager Member Terry Sanford 3912 Hwy13  Manager Member Dennis L Baker 1108 Hth St. Clarkston WA USA 99403  Manager Member Dennis L Baker 1108 Hth St. Clarkston WA USA 99403  Reinstatement Annual Report Form ADMIN DISSOLVED 08/31/2016  Reinstatement Annual Report Form ADMIN DISSOLVED 08/31/2016  I Manager Admin Street Suite #305  Lewiston ID 8360+ Kelsey Kunkel 301 Main Street Suite #305  Lewiston ID 8360+ Kelsey Kunkel 301 Managers OR Members. See Instructions.  Name Street or PO Address City State Country Postal Code  Kelsey Kunkel PO Box 373 Lewiston ID USA 83501  Manager Member Dennis L Baker 1108 Hth St. Clarkston WA USA 99403  Manager Member Dennis L Baker 1108 Hth St. Clarkston WA USA 99403  Manager Member	<del></del>	<del></del>		
SECRETARY OF STATE 450 N 4th STREET 450 N 4th STREET 450 N 4th STREET 450 RO 823720 BOISE, ID 83720-0080  REINSTATEMENT FEE  DUE: \$30.00  REINSTATEMENT FEE  DUE: \$30.00  Lewision IO 83501  Annager of Member  Name Street or PO Address City State Country Postal Code  Manager Member  Relsey Kunkel 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.  Manager Member  Name Street or PO Address City State Country Postal Code  Kelsey Kunkel PO Box 373  Lewiston IO USA 83501  Manager Member  Dennis L Baker 1108 11th St. Clarkston WA USA 99403  Manager Member  Dennis L Baker 1108 11th St. Clarkston WA USA 99403  Manager Member  Date:  Manager Member  Date:  Manager Member  Title:  Manager Manager Member  Manager Member  Manager Member  Date:  Manager Member  Title:  Manager Manager Manager Member  Member  Manager Member  Mem	f	•	(NOT A P.O. BOX)  GABRIELLE HUGUENIN  217 CEDAR ST STE 108  SANDPOINT ID 83864  Kelsey Kunkel  301 Main Street Suite #305	
DUE: \$30.00  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 Kelsey Kunkel PO Box 373 Lewiston TO USA 83501  Manager Member Terry Sanford 3912 How 13 Stites TO USA 83552  Manager Member Dennis L Baker 1108 11th St. Clarkston WA USA 99403  Manager Member 5. Organized Under the Laws of:  IDAHO W 152202  Manager Member Me	450 N 4th STREET PO BOX 83720	TITAN GROUP, LLC  111 MAIN ST  LEWISTON ID 83501		
Manager or Member Name Street or PO Address City State Country Postal Code  Manager Member Kelsey Kunkel PO Box 373 Lewiston IO USA 83501  Manager Member Terry Sanford 3912 How 13 Stites IO USA 83552  Manager Member Dennis L Baker 1108 11th St. Clarkston WA USA 99403  Manager Member Dennis L Baker 1108 11th St. Clarkston WA USA 99403  Manager Member	DUE: \$30.00	Lewisian ID 83501		
IDAHO W 152202 Signature:  Name (type or print):  Manager   M. Kelsey Kyskel  Manager   Member	Manager or Member Name Street or PO Address City State Country Postal Code  Manager Member Kelsey Kunkel PO Box 373 Lewiston IO USA 83501  Manager Member Terry Sanford 3912 How 13 Stites IO USA 83552  Manager Member Dennis L Baker 1108 11th St. Clarkston WA USA 99403			
	IDAHO	Signature:  Klass Limbel Name (type or print):  Hanager   M. Kelsey Kun	1/-25-2016 Title:	

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office