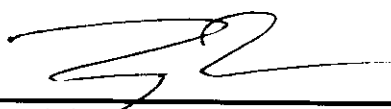


No. W 129905	Reinstatement Annual Report Form ADMIN DISSOLVED 01/16/2015		2. Registered Agent and Office (NOT A P.O. BOX) LOGAN LEATHAM 5118 N SAWYER AVE BOISE ID 83714
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. LOTUS VAPECASE, LLC LOGAN LEATHAM 5118 N SAWYER AVE BOISE ID 83714		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 <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Lotus Vaping Technologies, LLC	5118 N Sawyer Ave	Boise	ID	USA	83714
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 129905 </div>	6. Signature:  <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Name (type or print): <u>Logan Leatham</u> </div> <div style="width: 35%;"> Date: <u>1.29.15</u> Title: <u>manager</u> </div> </div>
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Issued 01/29/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Use this form to file the annual report for your business. Pay special attention to the mailing address. If the correct