FILED EFFECTIVE

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_{No.} W 62779	Reinstatement Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX)
Return to:	ADMIN DISSOLVED 08/10/2011	VANCE POULSEN
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.	9220 W FRANKLIN
		BOISE ID 83708
	V AND E, LLC	
·	VANCE POULSEN	
	9220 W FRANKLIN 10493 Country Squire BOISE ID 83704	3. <u>New</u> Registered Agent Signature.
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REINSTATEMENT	'	
FEE DUE: \$30.00		
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.		
Manager or Member Nam	ne Street or PO Address	City State Country Postal Code
Manager Member (circle one)	_	
Vance Pouls	en Pres. 10493 Country Sque sen 10493 Country Squee	N BUSE IN LISA 83704
Elizabeth Poul	sen 10493 Country Sauce	1 BUISE IN USA 83704
1		
5. Organized Under the Laws of	f: 6.	
	Signature:	Date: 女 - 22-11
IDAHO		
W 62779	Name (type or print): Vance Poulsen	Date: 8-22-11 Title: President
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Issued 08/16/2011 by LJM		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- **Block 1:** Pay special attention to the mailing address. If the correct 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 of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**
- Block 3: Only a new registered agent must sign in Block 3.
- **Block 4:** Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company.**Note: Do not put "same as last year" or "same as above". These will not be accepted.**
- **Block 5:** May not be altered through the use of this form.
- **Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.