

No. W 144178		Reinstatement Annual Report Form ADMIN DISSOLVED 02/23/2016				2. Registered Agent and Office (NOT A P.O. BOX) CAMDEN FORREY 5499 S MOONFIRE WAY BOISE ID 83709	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TRY FAIL ITERATE LLC CAMDEN FORREY 5499 S MOONFIRE WAY BOISE ID 83709				3. New Registered Agent Signature.	
REINSTATEMENT FEE 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 <input type="checkbox"/> Member <input checked="" type="checkbox"/>		Camden Forrey	5499 S. Moonfire Way	Boise	ID	United States	83709
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:		6.					
IDAHO W 144178		Signature: _____ _____ Name (type or print): _____ Camden Forrey					
		Date: 3/10/2016 Title: 3/10/2016					

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