


No. <b>W 138111</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 08/25/2015</b>		<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> LORI J TOEWS 776 POLARIS PEAK KELLOGG ID 83837																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	<b>1. Mailing Address: Correct in this box if needed.</b> LORI J. TOEWS, CPA, PLLC PO BOX 25 KELLOGG ID 83837		<b>3. <u>New</u> Registered Agent Signature.</b>																																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <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 type="checkbox"/></td> <td>Lori J Toews</td> <td>PO Box 25</td> <td>Kellogg</td> <td>Id.</td> <td>USA</td> <td>83837</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 type="checkbox"/>	Lori J Toews	PO Box 25	Kellogg	Id.	USA	83837	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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<b>5. Organized Under the Laws of:</b>  IDAHO W 138111	<b>6.</b> Signature: <u></u> Name (type or print): <u>Lori J. Toews</u> Date: <u>1/16/16</u> Title: <u>owner/Manager</u>																																					

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**