

No. W 126587		Reinstatement Annual Report Form ADMIN DISSOLVED 09/23/2014		2. Registered Agent and Office (NOT A P.O. BOX) TROY MCMILLAN 703 W SALES YARD ROAD EMMETT ID 83617	
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. MCVAPE, LLC TROY MCMILLAN 703 W SALES YARD ROAD EMMETT ID 83617		3. Next 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	
Manager ☐ Member ☒		Troy McMillan		703 W Sales Yard Rd Emmett ID US 83617	
Manager ☐ Member ☒		Les McMillan		3310 Tours Cabin Emmett ID US 83617	
Manager ☐ Member ☐					
Manager ☐ Member ☐					
5. Organized Under the Laws of: IDAHO W 126587		6. Signature: <i>Troy McMillan</i> Name (type or print): Troy W Sales Yard Rd		Date: 10/2/14 Title: owner	

Issued 10/02/2014 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM