

No. C 26416	Reinstatement Annual Report Form ADMIN DISSOLVED 05/13/2011		2. Registered Agent and Office (NOT A P.O. BOX) KATHLEEN A TATE 2930 N SILVERLEAF WAY MERIDIAN ID 83642														
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. TRIANGLE DAIRY, INC. KATHLEEN A TATE 2930 N SILVER LEAF WAY MERIDIAN ID 83646-3970 USA		3. New Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</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>President/ owner</td> <td>Kathleen A Tate-Edwards</td> <td>2930 N Silverleaf Way</td> <td>Meridian</td> <td>Idaho</td> <td>USA</td> <td></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President/ owner	Kathleen A Tate-Edwards	2930 N Silverleaf Way	Meridian	Idaho	USA	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President/ owner	Kathleen A Tate-Edwards	2930 N Silverleaf Way	Meridian	Idaho	USA												
5. Organized Under the Laws of: IDAHO C 26416		6. <table border="1"> <tr> <td>Signature: <i>Kathleen A Tate-Edwards</i></td> <td>Date: <i>04/17/2013</i></td> </tr> <tr> <td>Name (type or print): <i>Kathleen A Tate-Edwards</i></td> <td>Title: <i>President</i></td> </tr> </table>		Signature: <i>Kathleen A Tate-Edwards</i>	Date: <i>04/17/2013</i>	Name (type or print): <i>Kathleen A Tate-Edwards</i>	Title: <i>President</i>										
Signature: <i>Kathleen A Tate-Edwards</i>	Date: <i>04/17/2013</i>																
Name (type or print): <i>Kathleen A Tate-Edwards</i>	Title: <i>President</i>																

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