

Reinstatement for W 47074

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FILED EFFECTIVE

No. W 47074	Reinstatement Annual Report Form ADMIN DISSOLVED 05/05/2010		2. Registered Agent and Office (NOT A P.O. BOX)	
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. GENTLE ON MY MIND, L.L.C. THOMAS D GWINN 500 MICHAEL AVE POCATELLO ID 83201		THOMAS D GWINN 500 MICHAEL AVE POCATELLO ID 83201 3. New Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.				
Office Held	Name	Street or PO Address	City	State Country Postal Code
Manager/Member	Thomas D. Gwin	500 Michael Ave.	Pocatello, Id.	USA 83201
Manager/Member				
Manager/Member				
Member	Kathleen A. Gwin	500 Michael Ave.	Pocatello, Id	USA 83201
5. Organized Under the Laws of: 6.				
IDAHO W 47074		Signature: <u>Thomas D. Gwin, Manager</u> Name (type or print): <u>THOMAS D. GWIN</u>		Date: <u>6/2/10</u> Title: <u>Manager</u>
Issued 06/02/2010 by DK1				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM