

No. C 144087	Reinstatement Annual Report Form ADMIN DISSOLVED 08/31/2016		2. Registered Agent and Office (NOT A P.O. BOX) A ELIZABETH BURR JONES 1426 OAKLEY AVE BURLEY ID 83318														
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. A. ELIZABETH BURR-JONES, ATTORNEY AT LAW, P.C. A ELIZABETH BURR-JONES 1426 OAKLEY AVE PO BOX 267 BURLEY ID 83318		3. <u>New</u> 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</td><td>A. Elizabeth Burr Jones</td><td>P.O. Box 267</td><td>Burley</td><td>ID</td><td>Cassia</td><td>83318</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	A. Elizabeth Burr Jones	P.O. Box 267	Burley	ID	Cassia
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	A. Elizabeth Burr Jones	P.O. Box 267	Burley	ID	Cassia	83318											
5. Organized Under the Laws of: IDAHO C 144087	6. <table border="1"><tr><td>Signature: <i>A. Elizabeth Burr Jones</i></td><td>Date: <i>9/12/2016</i></td></tr><tr><td>Name (type or print): <i>A. Elizabeth Burr Jones</i></td><td>Title: <i>Pres.</i></td></tr></table>			Signature: <i>A. Elizabeth Burr Jones</i>	Date: <i>9/12/2016</i>	Name (type or print): <i>A. Elizabeth Burr Jones</i>	Title: <i>Pres.</i>										
Signature: <i>A. Elizabeth Burr Jones</i>	Date: <i>9/12/2016</i>																
Name (type or print): <i>A. Elizabeth Burr Jones</i>	Title: <i>Pres.</i>																

Issued 09/12/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM