

No. **W 70473**

Return to:
 SECRETARY OF STATE
 450 N 4th STREET
 PO BOX 83720
 BOISE, ID 83720-0080

**REINSTATEMENT
 FEE DUE: \$30.00**

Reinstatement Annual Report Form
 ADMIN DISSOLVED 04/06/2010

1. Mailing Address: Correct in this box if needed.

LAWRENCE GROUP, LLC (THE) *(LLC)*
 LISA A LAWRENCE
 3335 8TH ST E 812 main street
 LEWISTON ID 83501

2. Registered Agent and Office (NOT A P.O. BOX)
 LISA A LAWRENCE
 3335 8TH ST E 812 main Street *(LLC)*
 LEWISTON ID 83501

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
-------------	------	----------------------	------	-------	---------	-------------

Owner/ operator/ member	Lisa Lawrence	812 main Street <i>(LLC)</i>	Lewiston Id	USA		83501
-------------------------------	---------------	------------------------------	-------------	-----	--	-------

(LLC) ← physical address of business

5. Organized Under the Laws of:

**IDAHO
 W 70473**

6.

Signature: Lisa A. Lawrence Date: 5/5/10

Name (type or print): Lisa A. Lawrence Title: owner
Member