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| No. W 116832 | Reinstatement Annual Report Form ADMIN DISSOLVED 11/17/2015 | 2. Registered Agent and Office (NOT A P.O. BOX) DUC NGUYEN 11359 W MONTANA ST BOISE ID 83713 |
| 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. TOP NAILS LLC DUC NGUYEN 11359 W MONTANA ST BOISE ID 83713 |

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

| Manager or Member | Name | Street or PO Address | City | State | Country | Postal Code |
|---|------------|----------------------|-------|-------|---------|-------------|
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | DUC NGUYEN | 11359 W MONTANA ST | BOISE | ID | | 83713 |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> | TUYET MAI | 11359 W MONTANA ST | BOISE | ID | | 83713 |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |
| Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | | |

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| 5. Organized Under the Laws of: IDAHO W 116832 | 6. Signature:  Date: <u>09-26-2016</u> Name (type or print): <u>Duc NGUYEN</u> Title: <u>owner</u> |
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