


No. <b>W 38579</b>		<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 07/23/2018</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JOHN P OSAI <del>101 PARK AVENUE, SUITE 1</del> <del>IDAHO FALLS ID 83402</del> 550 2nd Street No. 201 Idaho Falls ID 83401	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720- 0080 <b>REINSTATEMENT FEE DUE: \$30.00</b>		1. Mailing Address: Correct in this box if needed. M & B VENTURES, LLC JOHN P OSAI <del>101 PARK AVENUE, SUITE 1</del> <del>IDAHO FALLS ID 83402</del> 550 2nd Street No. 201 Idaho Falls ID 83401		3. New Registered Agent Signature.	
<b>FILED</b>					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
<b>Manager or Member</b>		<b>Name</b>	<b>Street or PO Address</b>	<b>City</b>	<b>State Country Postal Code</b>
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>		John Osai	550 2nd Street No. 201	Idaho Falls	ID Bonneville 83401
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of:		6.			
IDAHO W 38579		Signature: 		Date: 8/27/18	
		Name (type or print): John P. Osai		Title: Manager	
Issued 08/27/2018 by online					