

No. W 160564 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 05/02/2017 1. Mailing Address: Correct in this box if needed. ZORBAS, LLC 1110 N FIVE MILE RD BOISE ID 83713	2. Registered Agent and Office (NOT A P.O. BOX) CLYDE B CRANDALL 1110 N FIVE MILE RD BOISE ID 83713 3. <u>New</u> Registered Agent Signature.							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.									
<table style="width: 100%; border: none;"> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 30%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Gus Georgilakis 8125 W Fairview Ave, Boise Idaho 83704								
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: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 160564 </div>			6. Signature: <u>Clyde B Crandall</u> Date: <u>6-22-17</u> Name (type or print): <u>Clyde B Crandall</u> Title: <u>CPA</u>						
Issued 06/23/2017 by online									

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM