

No. W 125443

Reinstatement Annual Report Form
ADMIN DISSOLVED 08/15/2014

Return to:

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

REINSTATEMENT FEE

DUE: \$30.00

2. Registered Agent and Office
(NOT A P.O. BOX)

REBECCA J POULSEN
1453 W HAYS ST
BOISE ID 83702

3. New Registered Agent Signature.

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"/>	Rebecca Poulsen	2802 W Bottom	Eagle	ID		83616
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:

IDAHO
W 125443

6.

Signature:

Name (type or print):

Date:

Title:

Rebecca J. Poulsen
Rebecca J Poulsen

3-10-15
OWNER