


No. <b>W 18064</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/09/2012</b>  <b>1. Mailing Address: Correct in this box if needed.</b> MANDARIN PINE, LLC SHEREE C TENG 833 21ST ST LEWISTON ID 83501	<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> SHEREE C TENG 833 21ST ST LEWISTON ID 83501  <b>3. New Registered Agent Signature.</b>
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**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 checked="" type="checkbox"/>	Sheree C Teng	2113 9th Ave	Lewiston	ID	USA	83501
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Allen S. Hui	3655 Country Club Ct.	Lewiston	ID	USA	83501
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Eva E. Hui	823 Kirkland Way	Kirkland	WA	USA	98033
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

<b>5. Organized Under the Laws of:</b>  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 18064</b> </div>	<b>6.</b> Signature:  Name (type or print): <u>Allen Hui</u>	Date: <u>5/25/2012</u> Title: <u>Manager/Owner</u>
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### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1: Entity name may not be altered through the use of this form.** Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information.** **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**