

No. <b>W 160196</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 05/02/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> FOSHA REAL ESTATE TEAM LLC 333 ROSSI STE 100 BOISE ID 83706		MICHAEL FOSHA 1111 N 6TH BOISE ID 83702
<b>REINSTATEMENT FEE DUE: \$30.00</b>			3. <u>New Registered Agent Signature.</u>
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 State Country Postal Code</b>
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Michael Fosha	1111 N. 6 <sup>th</sup> E.	Boise ID Ada 83702
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Amy Fosha	1111 N. 6 <sup>th</sup>	Boise ID Ada 83702
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:	6.		
<b>IDAHO W 160196</b>	Signature:	Date:	
		12-20-17	
	Name (type or print): Michael Fosha	Title: Member	
Issued 12/20/2017 by online			