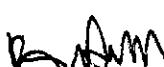
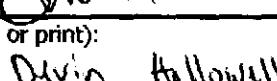


No. W 133387		Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015			2. Registered Agent and Office (NOT A P.O. BOX)		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. IDAHOLAWNS, LLC DAN HOLLOWELL 1910 W VICTORY RD MERIDIAN ID 83642			DAN HOLLOWELL 1910 W VICTORY RD MERIDIAN ID 83642 Devin Hollowell 2910 E. Victory Rd. Meridian, ID 83642 Devin Hollowell 2910 E. Victory Rd. Meridian, ID 83642		
REINSTATEMENT FEE DUE: \$30.00					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"/>		Devin Hollowell 2910 E Victory Rd. Meridian, ID 83642					
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 133387		Signature: 					
		Name (type or print): 					
		Date: 07/15/15					
		Title: Agent					

Issued 07/15/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM