
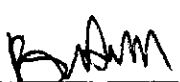
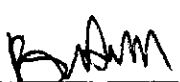
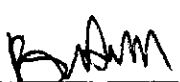


No. W 133387	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015		2. Registered Agent and Office (NOT A P.O. BOX) DAN HOLLOWELL <i>Devin Hollowell</i> 1910 W VICTORY RD <i>2910 E. Victory Rd</i> MERIDIAN ID 83642 <i>Meridian, ID 83642</i>																																		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> IDAHO LAWNS, LLC DAN HOLLOWELL 1910 W VICTORY RD MERIDIAN ID 83642 </div> <div style="width: 45%;"> <i>Idaho Lawns, LLC</i> <i>Devin Hollowell</i> <i>2910 E. Victory Rd.</i> <i>Meridian, ID 83642</i> </div> </div>																																				
	3. New Registered Agent Signature. <div style="text-align: center; font-size: 1.5em;">  </div>																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 20%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 20%;">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: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Devin Hollowell</td> <td>2910 E Victory Rd.</td> <td>Meridian,</td> <td>ID</td> <td></td> <td>83642</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			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"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 133387 </div>	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>07/15/15</u> </td> </tr> <tr> <td> Name (type or print): <u>Devin Hollowell</u> </td> <td> Title: <u>Agent</u> </td> </tr> </table>		Signature: 	Date: <u>07/15/15</u>	Name (type or print): <u>Devin Hollowell</u>	Title: <u>Agent</u>																															
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM