

<p>No. W 133191</p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p><b>REINSTATEMENT FEE DUE: \$30.00</b></p>		<p>Reinstatement Annual Report Form ADMIN DISSOLVED 04/26/2016</p> <p>1. Mailing Address: Correct in this box if needed. HQM REAL ESTATE, LLC HOLLY Q MURRAY 2327 N RUBINE LN KUNA ID 83634</p> <p>2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> HOLLY Q MURRAY 2327 N RUBINE LN KUNA ID 83634</p> <p>3. New Registered Agent Signature.</p>																																				
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6">Holly Murray 2327 N.Rubine Kuna ID- U.S. 83634</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></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"/>	Holly Murray 2327 N.Rubine Kuna ID- U.S. 83634						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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<p>5. Organized Under the Laws of:</p> <p>IDAHO W 133191</p>		<p>6.</p> <p>Signature: </p> <p>Name (type or print): <u>Holly Q. Murray</u></p>																																				
		<p>Date: <u>5/29/16</u></p> <p>Title: <u>Realtor</u></p>																																				

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM