




No. W 134734	Reinstatement Annual Report Form ADMIN DISSOLVED 05/25/2016		2. Registered Agent and Office (NOT A P.O. BOX) CHARLIE LITTLE 380 W 700 N RUPERT ID 83350																																			
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. L AND M HOOF CARE, LLC CHARLIE LITTLE 380 W 700 N RUPERT ID 83350		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">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: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Charlie Little</td> <td>380 W 700 N</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td>Rupert ID 83350</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 checked="" type="checkbox"/>	Charlie Little	380 W 700 N					Manager <input type="checkbox"/> Member <input type="checkbox"/>		Rupert ID 83350					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;">IDAHO W 134734</div>		6. <table style="width: 100%;"> <tr> <td style="width: 60%;">Signature: </td> <td style="width: 40%;">Date: <u>11.2.2017</u></td> </tr> <tr> <td>Name (type or print): <u>Charlie Little</u></td> <td>Title: _____</td> </tr> </table>		Signature: 	Date: <u>11.2.2017</u>	Name (type or print): <u>Charlie Little</u>	Title: _____																															
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