

FILED EFFECTIVE

No. W 81836	Reinstatement Annual Report Form ADMIN DISSOLVED 05/09/2012		2. Registered Agent and Office (NOT A P.O. BOX) KIMBERLY BEAUX 2248 W TANGO CREEK DRIVE MERIDIAN ID 83646 10121 W Bradford Dr. Star ID. 83669																																			
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. IDAHO INVESTMENT MANAGEMENT, LLC KIMBERLY A BEAUX 2248 W TANGO CREEK DRIVE MERIDIAN ID 83646 USA P.O. Box 2449 Eagle ID 83616																																					
REINSTATEMENT FEE DUE: \$30.00		3. New Registered Agent Signature.																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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>Kimberly Beaux</td> <td>P.O. Box 2449</td> <td>Eagle ID</td> <td>Ada</td> <td>83616</td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Christopher Beaux</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"/>	Kimberly Beaux	P.O. Box 2449	Eagle ID	Ada	83616		Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Christopher Beaux	"	"	"	"	"	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: IDAHO W 81836		6. Signature: <u>Kimberly A Beaux</u> Date: <u>5-24-13</u> Name (type or print): <u>KIMBERLY A BEAUX</u> Title: <u>OWNER</u>																																				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM