


No. W 139841		Reinstatement Annual Report Form ADMIN DISSOLVED 10/27/2017		2. Registered Agent and Office (NOT A P.O. BOX) TERRANCE R HARRIS 700 NORTHWEST BLVD COEUR D ALENE ID 83814	
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. LAKESHORE BLISS, LLC JOHN STONE 1745 TILFORD LANE STE A COEUR D ALENE ID 83814 2187 N. MAIN ST. COEUR D'ALENE, ID 83814		3. <u>New</u> Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
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"/>		JOHN STONE	2187 N. MAIN ST.	CDA	ID USA 83814
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 139841		Signature: 		Date: 11/07/17	
		Name (type or print): JOHN STONE		Title: Manager	

Issued 11/07/2017 by online

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