	Reinstatement Annual Report Form ADMIN DISSOLVED 05/14/2014			2. Registered Agent and Office (NOT A P.O. BOX) GEORGIA B WILLIAMS 48 PERCE CIRCLE NEZ Perce Circle		
450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	-	MONROE 5561 S. 875 E.			FISH HAVEN ID 83287 3. New Registered Agent Signature.	
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 ☑ Member ☐ C-	eorgia B. Williams	5 5561 5, 875 E So Ogden, UT 84	So Ogden	UT	USA	84405
Manager ☐ Member ☑ Ko	aren W. Burus	3107 N 550W	Pleasantl	lew ut	USA-	84415
Manager Member X Kent B Williams 1048 € 2nd S. Salflake City UT USA 8460Z						
Manager Member Mark T Williams 5995 EPacific Coast Long Beach CA USA 90803 Hwy						
5. Organized Under the Law	i i		•		Data	
IDAHO	Signature:	Leorgio Bh	Illian	wa)	Date:	2/15/15
W 90976	Name (type or	print): / praja B. W.	lliams	<u> </u>	Title: 12	15/15

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM