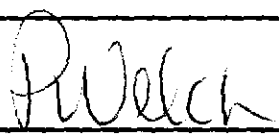


No. W 72105	Reinstatement Annual Report Form ADMIN DISSOLVED 06/07/2012		2. Registered Agent and Office (NOT A P.O. BOX) POPPY L WELCH CPA 9345 HWY 44 MIDDLETON ID 83644 15046 BURGER LANE CALDWELL, ID 83607
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. POPPY L. WELCH, CPA, PLLC 9345 HWY 44 MIDDLETON ID 83644 15046 BURGER LANE CALDWELL, ID 83607		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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Poppy L Welch	15046 Burger Ln	Caldwell	ID	USA	83607
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: <div style="text-align: center;"> IDAHO W 72105 </div>	6. Signature: <u></u> Date: <u>2-14-17</u> <hr/> Name (type or print): <u>Poppy L. Welch</u> <hr/> Title: <u>Manager</u>
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Issued 08/24/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM