
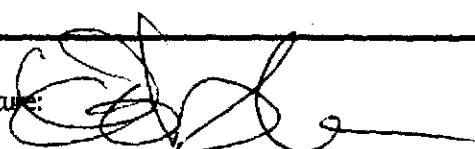


<b>No. W 169320</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 10/27/2017</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> KELLY KNOPP 3409 SYCAMORE DR BOISE ID 83703 <u>NORLE HARDESTY</u> <u>404 S 8TH ST SUITE L-105</u> <u>BOISE ID 83702</u>																																			
<b>Return to:</b> SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>1. Mailing Address: Correct in this box if needed.</b> SWELL LLC 404 S 8TH ST SUITE L-105 BOISE ID 83702		<b>3. New Registered Agent Signature.</b> 																																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>																																						
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td><u>NORLE HARDESTY</u></td> <td><u>448 E THURMAN WAY</u></td> <td><u>GC</u></td> <td><u>ID</u></td> <td><u>ADA</u></td> <td><u>83702</u></td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td><u>Monika Soper</u></td> <td><u>780 W. Main</u></td> <td><u>Boise</u></td> <td><u>ID</u></td> <td><u>ADA</u></td> <td><u>83702</u></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> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	<u>NORLE HARDESTY</u>	<u>448 E THURMAN WAY</u>	<u>GC</u>	<u>ID</u>	<u>ADA</u>	<u>83702</u>	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	<u>Monika Soper</u>	<u>780 W. Main</u>	<u>Boise</u>	<u>ID</u>	<u>ADA</u>	<u>83702</u>	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-size: 1.2em;">             IDAHO              W 169320           </div>		<b>6.</b> <div style="display: flex; justify-content: space-between;"> <div> <b>Signature:</b>    <b>Name (type or print):</b>  <u>NORLE HARDESTY</u> </div> <div> <b>Date:</b>  <u>11/10/17</u>  <b>Title:</b>  <u>DIRECTOR</u> </div> </div>																																				

Issued 11/10/2017 by online

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM