

<p>No. W 94382</p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p><b>REINSTATEMENT FEE DUE: \$30.00</b></p>		<p>Reinstatement Annual Report Form ADMIN DISSOLVED 09/20/2012</p> <p>1. <b>Mailing Address: Correct in this box if needed.</b> BEAR PAW HERBALS LLC RICHARD CHAMP PO BOX 642 FILER ID 83328 USA</p>		<p>2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> RICHARD CHAMP 120 5TH ST FILER ID 83328</p>																																				
				<p>3. <u>New Registered Agent Signature.</u></p>																																				
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table> <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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td colspan="6">Richard Champ 8019642 file ID twin falls 83328</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Richard Champ 8019642 file ID twin falls 83328						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p>5. Organized Under the Laws of:  IDAHO W 94382</p>		<p>6.</p> <p>Signature: </p> <p>Name (type or print): <u>Richard Champ</u></p> <p>Date: <u>10/27/12</u></p> <p>Title: <u>owner</u></p>																																						
<p>Issued 10/19/2012 by SLD</p>																																								

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**