

No. W 66037	Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009		2. Registered Agent and Office (NOT A P.O. BOX) ERIC J WHITE 3573 W KIRKAM ST MERIDIAN ID 83646
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. TRIPLE WIN MARKETING, LLC. 3573 W KIRKAM ST MERIDIAN ID 83646 <i>4922 W Moonlake Dr.</i> <i>Meridian ID 83646</i>		3. <u>New</u> 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"/>	<i>Erik White</i>	<i>4922 W Moonlake Dr</i>	<i>Meridian ID</i>			<i>83646</i>
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; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 66037</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; vertical-align: top;"> Signature: <i>[Signature]</i> <hr/> Name (type or print): <i>Eric J. White</i> </td> <td style="width: 40%; vertical-align: top;"> Date: <i>2-6-15</i> <hr/> Title: <i>Manager/owner</i> </td> </tr> </table>	Signature: <i>[Signature]</i> <hr/> Name (type or print): <i>Eric J. White</i>	Date: <i>2-6-15</i> <hr/> Title: <i>Manager/owner</i>
Signature: <i>[Signature]</i> <hr/> Name (type or print): <i>Eric J. White</i>	Date: <i>2-6-15</i> <hr/> Title: <i>Manager/owner</i>		

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM