

No. W 47768	Reinstatement Annual Report Form ADMIN DISSOLVED 05/10/2013		2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. COBBS INVESTMENTS, LLC DIANE E. AMEN 4016 MOUNTAIN VIEW DR BOISE ID 83704 <i>5046 N. Maidstone Way Boise, Id 83713</i>	LYLE R COBBS 4016 MOUNTAIN VIEW DR BOISE ID 83704 <i>DIANE E. AMEN 5046 N. Maidstone Way Boise Idaho 83713</i>	
REINSTATEMENT FEE DUE: \$30.00	3. New Registered Agent Signature. <i>[Signature]</i>		
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 checked="" type="checkbox"/>	DIANE E. AMEN	5046 N. Maidstone Way	Boise ID Ada 83713
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Nancy M. Miller	1059 Wind Waker Pl	Boyle ID Ada 83616
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Kathryn A. Boling	653 N. Greer Ave,	Nixa MO Christian 65714
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Lyla R. Croft	12394 W. Edna Dr.	Boise ID Ada 83713
5. Organized Under the Laws of: IDAHO W 47768		6. Signature: <i>[Signature]</i> Date: 6-4-2013 Name (type or print): DIANE E. AMEN Title: Managing Member	

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM