

No. W 173239	Reinstatement Annual Report Form ADMIN DISSOLVED 01/22/2018		2. Registered Agent and Office (NOT A P.O. BOX) HEATHER ANNIS 115 MAGNOLIA AVE FRUITLAND ID 83619																																			
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. HEATHERS LITTLE BLACK FASHION TRUCK LLC HEATHER ANNIS 115 MAGNOLIA AVE FRUITLAND ID 83619	3. <u>New</u> Registered Agent Signature.																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"><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 checked="" type="checkbox"/> Member <input type="checkbox"/></td><td>Heather Annis</td><td>115 Magnolia Ave</td><td>Fruitland,</td><td>ID</td><td>USA</td><td>83619</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><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Heather Annis	115 Magnolia Ave	Fruitland,	ID	USA	83619	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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5. Organized Under the Laws of: IDAHO W 173239	6. Signature: <u>Heather Annis</u> Name (type or print): <u>Heather Annis</u>			Date: <u>1/26/18</u> Title: <u>Owner</u>																																		

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