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2012 MAY 29 AM 9: 47

No. W 89891

Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012 2. Registered Agent and Office (NOT A P.O. BOX)

**504 E AVE A** 

KATHLEEN C MCKEVITT

SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080

I. Mailing Address: Correct in this box if needed.

ONE LIGHT STAND, LLC

KATHLEEN C MCKEVITT

JEROME ID 83338

501 EAVER\_1420 S. Pocahoutare tt 4 TEROME ID 83338 USA Pah rump NV 89048
3. New H

REINSTATEMENT FEE

DUE: \$30.00

Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager Member

Manager Member

5. Organized Under the Laws of:

**IDAHO** W 89891

Name (type or print): Kathleen C. McKerith

issued 05/21/2012 by KAH

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must aign in Block 3.

Block 4: Check either Member or Manager. Enter names and business addresses of managers or members of the limited liability company. Note: DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.