No. W 90189 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Reinstatement Annual Report Form ADMIN DISSOLVED 04/26/2016 1. Mailing Address: Correct in this box if needed. HPA IDAHO, LLC DEBORAH STERN 3021 LORNA RD STE 200 BIRMINGHAM AL 35216	2. Registered Agent and Office (NOT A P.O. BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA
REINSTATEMENT FEE DUE: \$30.00		3. New 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 Member Hop or Portice LC Manager Member		
Manager Member		
5. Organized Under the La IDAHO W 90189	ws of: 6. Signature: Name (type or print):	Date: 5/2/16 Title: CFC
Issued 05/02/2016 by onlin	e	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM