


FILED EFFECTIVE

No. W 60419 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 06/07/2012 1. Mailing Address: Correct in this box if needed. HUNTSMAN TECHNOLOGY, LLC AMBER HUNTSMAN 137 NORTH 3RD WEST #7 3145 E Sunnyside REXBURG ID 83440 USA Ammon, ID 83406	2. Registered Agent and Office (NOT A P.O. BOX) RYAN S HUNTSMAN 137 NORTH 3RD WEST #7 REXBURG ID 83440 3145 E Sunnyside Ammon, ID 83406 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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Ryan Huntsman	3145 E Sunnyside	Ammon	ID	USA	83406
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Amber Huntsman	3145 E Sunnyside	Ammon	ID	USA	83406
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-size: 1.2em;"> IDAHO W 60419 </div>		6. Signature:  <hr/> Name (type or print): <u>Ryan Huntsman</u> <hr/> <div style="float: right; text-align: right;"> Date: <u>7/1/15</u> <hr/> Title: <u>Owner</u> <hr/> </div>				
Issued 07/01/2015 by online						