

**FILED EFFECTIVE**

No. <b>W 144777</b>	<b>Reinstatement Annual Report Form</b>		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	ADMIN DISSOLVED 02/27/2018		RANDY OSWALT <del>8969 E PARKS RD</del> <del>ATHOL ID 83861</del> 32596 N. 8th ST. SPIRIT LAKE, ID 83869																																			
REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. INNOVATIVE SAFETY & DESIGN LLC <del>PO BOX 541</del> <del>ATHOL ID 83861</del> P.O. BOX 1673 SPIRIT LAKE, ID 83869		3. New 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>Tammy Fladquist</td> <td>P.O. BOX 1673</td> <td>SPIRIT LAKE,</td> <td>ID</td> <td></td> <td>83869</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Randy Oswalt</td> <td>P.O. BOX 1673</td> <td>SPIRIT LAKE,</td> <td>ID.</td> <td></td> <td>83869</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"/>	Tammy Fladquist	P.O. BOX 1673	SPIRIT LAKE,	ID		83869	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Randy Oswalt	P.O. BOX 1673	SPIRIT LAKE,	ID.		83869	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:	6.																																					
IDAHO W 144777	Signature: <u>Randy Oswalt</u> Name (type or print): <u>Randy Oswalt</u>		Date: <u>5-2-2018</u> Title: <u>MANAGER</u>																																			
Issued 05/02/2018 by online																																						