No. W 58241	Reinstatement Annual Report Form ADMIN DISSOLVED 04/15/2013	2. Registered Agent and Office (NOT A P.O. BOX) JULIE HESS 563 S CANVASBACK WAY MERIDIAN ID 83642
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. DR. JULIE L. HESS, LLC 563 S CANVASBACK WAY MERIDIAN ID 83642	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

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 ☐	Julie Hess	563 S. Canvasback Way	Meridian	ID.	USA	83642
Manager ☐ Member ☐						
Manager ☐ Member ☐						
Manager ☐ Member ☐						

5. Organized Under the Laws of:	6.
IDAHO W 58241	Signature: J. Hess Name (type or print): Julie L. Hess Date: 8/12/13 Title: Manager Owner

Issued 08/12/2013 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM