

W 49039

<http://www.sos.idaho.gov/CorpPrintForm/display.aspx?enum=W4903>**FILED**

No. W 49039	Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2015		2. Registered Agent and Office (NOT A P.O. BOX) SCOTT E HICKS 16988 BASALT DR COEUR D'ALENE ID 83814																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. MARTINA'S GROUP, LLC SCOTT E HICKS 2209 E SHERMAN AVE COEUR D'ALENE ID 83814 USA c/o Brent G. Schlotthauer 409 Coeur d' Alene Ave. Coeur d' Alene, ID 83814		3. New Registered Agent Signature																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions. <table border="0"> <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 ☐ Member ☒</td> <td>Hicks, LLC</td> <td>16988 Basalt Dr.</td> <td>Coeur d' Alene,</td> <td>ID,</td> <td></td> <td>83814</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☐ Member ☒	Hicks, LLC	16988 Basalt Dr.	Coeur d' Alene,	ID,		83814	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 49039		6. Signatures:  Name (type or print): Scott Hicks Date: 1-7-16 Title: Member																																				

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM