No. W 116264 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Reinstatement Annual Report Form ADMIN DISSOLVED 11/14/2013 1. Mailing Address: Correct in this box if needed. BUSINESS LEVERAGE LLC PO BOX 254 STAR ID 83669	2. Registered Agent and Office (NOT A P.O. BOX) CHRIST T TROUPIS 1299 E IRON EAGLE SUITE 130 EAGLE ID 83616
REINSTATEMENT FEE DUE: \$30.00		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		
1	Lou Esposito P.O. Box 254 Stav	
Manager Member Philip W. Collier 12055 W. Edna St. Boise, ID USA 83713		
Manager Member Member		
Manager Member Member		
5. Organized Under the Laws of: 6. Signature: Date:		
IDAHO		11/10/14
W 116264	Name (type or print):	Title:
Issued 11/10/2014 by online		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaha, not a Registered agent Mail Roy