

**FILED**

No. <b>W 65987</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 11/30/2017</b>	2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> LISA URSICH <del>101 1/2 E SHERMAN AVE #201</del> <del>COEUR D'ALENE ID 83814</del> 4449 Greenchain Loop # 2 Coeur d'Alene Id. 83814																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. WHITENING FAST, LLC LISA D URSICH <del>401 1/2 E SHERMAN AVE #201</del> <del>COEUR D'ALENE ID 83814</del> 4449 Greenchain Loop # 2 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="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 type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>LISA URSICH</td><td>4449 Greenchain Loop # 2</td><td>Coeur d'Alene</td><td>Id.</td><td></td><td>83814</td></tr><tr><td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td><td>Christopher Ursich</td><td>4449 Greenchain Loop # 2</td><td>Coeur d'Alene</td><td>Id.</td><td></td><td>83814</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	LISA URSICH	4449 Greenchain Loop # 2	Coeur d'Alene	Id.		83814	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Christopher Ursich	4449 Greenchain Loop # 2	Coeur d'Alene	Id.		83814	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:  <b>IDAHO W 65987</b>	6. Signature: <u>Lisa Ursich</u> Date: <u>1-25-18</u> Name (type or print): <u>LISA URSICH</u> Title: <u>1-25-18</u>																																				

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