No. W 85012	Reinstatement Annual Report Form ADMIN DISSOLVED 09/23/2014 2. Registered Agent and Office (NOT A P.O. BOX)	(NOT A P.O. BOX)
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. THOUGHT FULL SPOT LLC (THE) DIANE LOPEZ 4948-GUN FLOWER TWO WYLDWOOD LOVE POCATELLO ID 89202 83301	DIANE H LOPEZ 4940 SUN FLOWER POCATELLO ID 83202
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		
Manager Member	Dinne Lupez 467 Wyldwood lane Po	cutille, Id. USA 83201
Manager Member	, and the second	
Manager Member		
Manager Member		
5. Organized Under the Laws of: 6.		
IDAHO	Signature:	Date: 10-20-14
W 85012	Name (type or print):	Title: Owner
Issued 09/29/2014 by online		