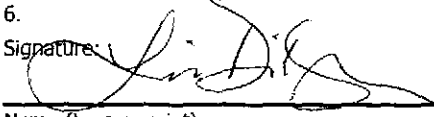


No. W 15520	Reinstatement Annual Report Form ADMIN DISSOLVED 09/27/2017		2. Registered Agent and Office (NOT A P.O. BOX) STEPHEN T SHERER 730 EAST 1ST ST MERIDIAN ID 83642
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. PUNA WAI WELA, LLC LINA DILLINGHAM PO BOX 714 WADDELL AZ 85355-0714 USA 3021 Black Hills Blvd. Heath Texas 75126		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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Lina Dillingham	3021	
Manager <input type="checkbox"/> Member <input type="checkbox"/>		3021 Black Hills Blvd.	
Manager <input type="checkbox"/> Member <input type="checkbox"/>		Heath Texas 75126	8764
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 15520</div>		6. Signature:  Date: <u>1/12/2018</u> Name (type or print): <u>LINA Dillingham</u> Title: _____	
Issued 01/12/2018 by JL1			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM