

No. **W 109211**

Reinstatement Annual Report Form  
REINSTATEMENT ANNUAL REPORT FORM  
**ADMIN DISSOLVED 03/07/2013**

2. registered Agent and office

(NOT A P.O. BOX) **FILED EFFECTIVE**

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.

ADOPT A BETTER FUTURE LLC  
7300 MODOC ST  
BOISE ID 83709  
574 West End Ave., #55  
New York, NY 10024

**KAREN ROEST KARIN R-DEST**  
7300 MODOC ST  
BOISE ID 83709

**REINSTATEMENT FEE  
DUE: \$30.00**

3. New 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"/>	<b>KARIN ROEST</b>	<b>574 West End Ave., #55</b>	<b>NY, NY</b>	<b>USA</b>		<b>10024</b>
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of:

**IDAHO  
W 109211**

6.

Signature:

*KR Roest*

Date:

~~03/07/13~~ **4/17/13**

Name (type or print):

**KARIN ROEST**

Title:

**CEO**