


# FILED

No. <b>W 142683</b>		<b>Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2015</b>		2. Registered Agent and Office (NOT A P.O. BOX) RONNIE TIPTON <del>1838 E KAMAY DR</del> <b>2475 N. LOCHNESS WAY</b> MERIDIAN ID 83646	
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. UNIQUE DESIGN & SHINE LLC RONNIE TIPTON <del>1838 E KAMAY DR</del> <b>2475 N. LOCHNESS WAY</b> MERIDIAN ID 83646		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"/>		Ronnie Tipton		2475 N. LOCHNESS WAY Meridian ID Ada 83646	
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:		6.			
IDAHO W 142683		Signature: 		Date: <u>11-16</u>	
		Name (type or print): <u>Ronnie Tipton</u>		Title: <u>Manager</u>	
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