

No. W 96807	Reinstatement Annual Report Form ADMIN DISSOLVED 01/24/2017		2. Registered Agent and Office (NOT A P.O. BOX)
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. INTERMOUNTAIN NEUROVISION, LLC NICKOLAS RUSSELL C/O BLAKE'S RA LLC 2484 N STOKESBERRY PLACE STE 150 19593 MADISON RD MERIDIAN ID 83646 Nampa, ID 83687	BRIAN W TATOMIR 13748 S MORNINGSIDE ST Nampa ID 83651 BLAKE'S Registered Agent LLC 19593 MADISON RD Nampa, ID 83687	
		3. New Registered Agent Signature: <i>[Signature]</i> BLAKE'S Registered Agent LLC	
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"/>	BRIAN TATOMIR	13748 S. Morning Side St	Nampa ID 83651 USA
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 96807	6. Signature: <i>[Signature]</i> Name (type or print): BRIAN TATOMIR		Date: 3/18/17 Title: 3/18/17
	Issued 02/07/2017 by online		