

FILED EFFECTIVE

No. W 60630	Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2013		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. BECKY WOLERY ENTERPRISES, LLC BECKY J WOLERY 2087 NEWMAN LN <i>701 Box 421</i> PAYETTE ID 83661 USA		BECKY WOLERY 2087 NEWMAN LN <i>1931 Uehlin Dr</i> PAYETTE ID 83661 3. New Registered Agent																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instr. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"><i>Becky Wolery 1931 Uehlin Dr., Payette, Id., USA 83661</i></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	<i>Becky Wolery 1931 Uehlin Dr., Payette, Id., USA 83661</i>						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	<i>Becky Wolery 1931 Uehlin Dr., Payette, Id., USA 83661</i>																																					
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 60630	6. Signature: <i>Becky Wolery</i> Name (type or print): <i>Becky Wolery</i>			Date: <i>1-21-17</i> Title: <i>1-21-17</i>																																		
Issued 01/20/2017 by online																																						