


<p>No. W 126036</p>	<p>Reinstatement Annual Report Form ADMIN DISSOLVED 09/22/2015</p>	<p>2. Registered Agent and Office (NOT A P.O. BOX) RUSS POE 11852 W HICKORY DR BOISE ID 83713</p>																																			
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p>	<p>1. Mailing Address: Correct in this box if needed. ELEVATE REAL ESTATE LLC RUSS POE 11852 W HICKORY DR BOISE ID 83713</p>	<p>3. <u>New</u> Registered Agent Signature.</p>																																			
<p>REINSTATEMENT FEE DUE: \$30.00</p>	<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>RUSSELL B POE</td> <td>11852 W. HICKORY DR</td> <td>BOISE</td> <td>ID</td> <td>USA</td> <td>83713</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	RUSSELL B POE	11852 W. HICKORY DR	BOISE	ID	USA	83713	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p>5. Organized Under the Laws of: IDAHO W 126036</p>	<p>6.</p> <p>Signature: </p> <p>Name (type or print): <u>Russ Poe</u></p> <p>Date: <u>3/16/2016</u></p> <p>Title: <u>MEMBER</u></p>																																				
<p>Issued 03/15/2016 by online</p>																																					