No. W 77282 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009 1. Mailing Address: Correct in this box if needed. BLACK DOG AND COMPANY L.L.C. 407 S 7TH AVE NAMPA ID 83686 NAMPA ID 83686 1. New Registered Agent and Office (NOT A P.O. BOX) REVIN C AND REPORT REVIN C AND RESON 829 S BONNEVILLE OF REPORT 829 S BONNEVILLE OF REVINCE 623 FM AVE 3. New Registered Agent Signature. NAMPA ID 83686 NAMPA ID 83686
4. Limited Liability Compan Manager or Member Nan	ies: Enter Names and Addresses of Managers OR Members. Street or PO Address City State Country Postal Code
SENNI KEVIN	FER E ACHESON 6237+ AVESNAMPA ID 83651
5. Organized Under the Laws of IDAHO W 77282	Signature: Date: 2/1/1 Name (type or print): 1/2 VIN ACHESON Title: 1/2 VIN SE
IDAHO	Signature: Date: 2/1/1/

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- **Block 1:** Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.
- **Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**
- **Block 3:** Only a **new** registered agent must sign in Block 3.
- **Block 4:** Enter names and business addresses of managers or members of the limited liability company. **Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted.**
- **Block 5:** May not be altered through the use of this form.
- **Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.