

No. <b>W 133719</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 04/21/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MISTY YOPP 1075 SADDLE RIDGE RD MOSCOW ID 83843																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>				1. <b>Mailing Address: Correct in this box if needed.</b> M. YOPP CONSULTING, LLC MISTY YOPP 1075 SADDLE RIDGE RD MOSCOW ID 83843																																		
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Misty Yopp</td> <td>1075 Saddle Ridge Rd</td> <td>Moscow</td> <td>ID</td> <td>USA</td> <td>83843</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"/>	Misty Yopp	1075 Saddle Ridge Rd	Moscow	ID	USA	83843	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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5. Organized Under the Laws of:  <b>IDAHO</b> <b>W 133719</b>		6. <table border="1"> <tr> <td>Signature: <u>M. Yopp</u></td> <td>Date: <u>6/23/15</u></td> </tr> <tr> <td>Name (type or print): <u>Misty Yopp</u></td> <td>Title: <u>owner</u></td> </tr> </table>		Signature: <u>M. Yopp</u>	Date: <u>6/23/15</u>	Name (type or print): <u>Misty Yopp</u>	Title: <u>owner</u>																															
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Issued 06/02/2015 by online

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM