

No. C 76719	Reinstatement Annual Report Form ADMIN DISSOLVED 12/17/2013		2. Registered Agent and Office (NOT A P.O. BOX) MERNA LINDLEY 6501 USTICK BOISE ID 83704
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. DO YOU LOVE ME, INC. 6501 USTICK BOISE ID 83704		3. <u>New</u> Registered Agent Signature.
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.			
Office Held Name Street or PO Address City State Country Postal Code			
<p><i>Merina Lindley</i> → <i>Pres</i> <i>Adam Lindley</i> → <i>Sec</i> → 6501 Ustick Boise ID 83704</p>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO C 76719 </div>		6. <div style="display: flex; justify-content: space-between;"> <div> Signature: <hr/> Name (type or print): <i>Merina Lindley</i> </div> <div> Date: <i>12-14-14</i> <hr/> Title: <i>Sec</i> </div> </div>	
Issued 12/09/2014 by CLH			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the