

No. <b>W 22159</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 12/26/2017</b>		2. Registered Agent and Office (NOT A P.O. BOX) Need to Appoint																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. BEEHIVE SALON, LLC (THE) JOHN L GILLESPIE <del>1109 W. MAIN ST. STE 110</del> <del>BOISE ID 83702-5980</del> 1410 N. Knights Dr Boise ID 83712		<div style="text-align: right; font-size: 2em; font-weight: bold;">FILED</div> John Gillespie 1410 N Knights Dr Boise ID 83712  3. New Registered Agent Signature. John Gillespie																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" 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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>John Gillespie</td> <td>1410 N Knights Dr</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83712</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Karen Gillespie</td> <td>1410 N. Knights Dr</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83712</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	John Gillespie	1410 N Knights Dr	Boise	ID	USA	83712	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Karen Gillespie	1410 N. Knights Dr	Boise	ID	USA	83712	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 W 22159</b>	6. Signature: <u>John Gillespie</u> Date: <u>1/18/18</u> Name (type or print): <u>John Gillespie</u> Title: <u>owner / mgr</u>																																					