




No. W 121379	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015		2. Registered Agent and Office (NOT A P.O. BOX) MURRY BUTLER 169 RED CLOVER SANDPOINT ID 83864
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. MICHAEL & LUCY, LLC MICHAEL HUANG 100 TIBBETTS DR PONDERAY ID 83852		3. <u>New</u> Registered Agent Signature.

4. **Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Michael Huang	100 Tibbetts Dr.,	Ponderay ID	USA		83852
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Lucy Huang	100 Tibbetts Dr.,	Ponderay ID	USA		83852
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 121379</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <div style="text-align: center; font-size: 1.2em;">4-26-17</div> </td> </tr> <tr> <td> Name (type or print): Michael Huang </td> <td> Title: Manager </td> </tr> </table>	Signature: 	Date: <div style="text-align: center; font-size: 1.2em;">4-26-17</div>	Name (type or print): Michael Huang	Title: Manager
Signature: 	Date: <div style="text-align: center; font-size: 1.2em;">4-26-17</div>				
Name (type or print): Michael Huang	Title: Manager				

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