

No. W 84927	Reinstatement Annual Report Form ADMIN DISSOLVED 09/10/2013		2. Registered Agent and Office (NOT A P.O. BOX) KELLY WHITE 513 CENTERVILLE RD NEW CENTERVILLE ID 83631 <i>66 View Dr.</i>																																			
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. WHITE ELECTRIC L.L.C. KELLY WHITE 66 VIEW DR NEW CENTERVILLE ID 83631		3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions.																																						
<table 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 checked="" type="checkbox"/></td> <td>Kelly White</td> <td>66 View Dr.</td> <td>New Centerville</td> <td>ID</td> <td></td> <td>83631</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Matthew White</td> <td>66 View Dr.</td> <td>New Centerville</td> <td>ID</td> <td></td> <td>83631</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 checked="" type="checkbox"/>	Kelly White	66 View Dr.	New Centerville	ID		83631	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Matthew White	66 View Dr.	New Centerville	ID		83631	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: <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 84927</div>	6. Signature: <u>Kelly White</u> Name (type or print): <u>Kelly White</u> Date: <u>9-19-13</u> Title: <u>Manager/owner</u>																																					

Issued 09/19/2013 by JLi

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM