




No. <b>W 5530</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/13/2011</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) MANDERSON L MILES 312 SEVENTEENTH ST LEWISTON ID 83501	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT</b> <b>FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b>  KNOWLTON & MILES, PLLC MANDERSON L MILES 312 SEVENTEENTH ST LEWISTON ID 83501		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 Member (circle one)						
<u>Manager</u>	Manderson L Miles - Manager	312 17th ST	Lewiston	ID	USA	83501

5. Organized Under the Laws of:  <div style="text-align: center; font-size: 1.2em;">             IDAHO W 5530           </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: </td> <td style="width: 30%;">Date: 6/6/11</td> </tr> <tr> <td>Name (type or print): Manderson L Miles</td> <td>Title: 6/6/11</td> </tr> </table>	Signature: 	Date: 6/6/11	Name (type or print): Manderson L Miles	Title: 6/6/11
Signature: 	Date: 6/6/11				
Name (type or print): Manderson L Miles	Title: 6/6/11				

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.  
**Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

**Block 3:** Only a new registered agent must sign in Block 3.

**Block 4:** Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

**Block 5:** May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.