

No. W 81744	Reinstatement Annual Report Form ADMIN DISSOLVED 05/13/2011				2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. INGRIDS, LLC INGRID LEE 242 N 8TH ST STE 210 BOISE ID 83702				BRIANT MCCOLL 3858 N GARDEN CENTER WAY STE 200 BOISE ID 83703 Ingrid Lee 3102 Treasure Dr Boise ID 83703	
REINSTATEMENT FEE DUE: \$30.00					3. New Registered Agent Signature. <i>Ingrid Lee</i>	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Name <i>Ingrid Lee</i>	Street or PO Address <i>3102 Treasure Boise ID priv</i>	City	State	Country	Postal Code <i>83703</i>
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of: IDAHO W 81744		6. Signature: <i>Ingrid Lee</i>	Date: <i>4/23/12</i>			
		Name (type or print): <i>Ingrid Lee</i>	Title: <i>Member</i>			
Issued 04/23/2012 by KAH						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM