

No. W 85257	Reinstatement Annual Report Form ADMIN DISSOLVED 10/04/2012		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 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. STREAMSIDE FINANCIAL, LLC MICHAEL R PATRICK 1025 S BRIDGEWAY PL 1385 E Fairway Dr STE 200 Eagle, Id 83616 EAGLE ID 83616		MICHAEL A HALL Michael Patrick 660 W FRANKLIN STE 220 1385 E Fairway Dr. MERIDIAN ID 83642 Eagle, Id 83616 3. <u>New Registered Agent Signature.</u> <i>Michael R Patrick</i>																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Michael R Patrick</td> <td>1385 E Fairway Dr</td> <td>Eagle</td> <td>Id</td> <td>USA</td> <td>83616</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> <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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Michael R Patrick	1385 E Fairway Dr	Eagle	Id	USA	83616	Manager <input type="checkbox"/> Member <input type="checkbox"/>							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: IDAHO W 85257	6. Signature: <i>Michael R Patrick</i> Name (type or print): MICHAEL R PATRICK Date: 20 October 2017 Title: Member																																					

Issued 10/17/2017 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM