

No. W 77549		Reinstatement Annual Report Form ADMIN DISSOLVED 12/04/2012		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT RYAN HINTON 3531 E 3195 N KIMBERLY ID 83341	
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. HIGH MOUNTAIN HAY TRANSPORT, LLC 1096 NORTH EASTLAND DRIVE SUITE 200 TWIN FALLS ID 83301- Po Box 330 Kimberly, ID 83341			
REINSTATEMENT FEE DUE: \$30.00				3. New 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 type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Ryan Hinton</i>			P.O. 330	Kimberly	Id USA 83341
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 77549		6. Signature:  Name (type or print): <i>Robert Ryan Hinton</i>			
		Date: <u>6-15-13</u>			
		Title: <u>Manager</u>			
Issued 06/17/2013 by CLH					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM