

<p>No. W 167862</p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p>EXPELDED REINSTATEMENT FEE DUE: \$30.00 (\$0.00)</p>		<p>Reinstatement Annual Report Form ADMIN DISSOLVED 09/27/2017</p> <p>1. Mailing Address: Correct in this box if needed. LOVE YOUR IDAHOME LLC MICHAEL FRITH PO BOX 2994 HAILEY ID 83333</p>	<p>2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL FRITH 230 W WALNUT HAILEY ID 83333</p>																																			
<p>3. New Registered Agent Signature.</p>																																						
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>MICHAEL FRITH</td> <td>Box 2994</td> <td>HAILEY</td> <td>ID -</td> <td>IDAHO</td> <td>83333</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Jamie Stone</td> <td>Box 2318</td> <td>Hailey</td> <td>ID</td> <td>IDAHO</td> <td>83333</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 type="checkbox"/>	MICHAEL FRITH	Box 2994	HAILEY	ID -	IDAHO	83333	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Jamie Stone	Box 2318	Hailey	ID	IDAHO	83333	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p>5. Organized Under the Laws of: IDAHO W 167862</p>		<p>6.</p> <p>Signature: <u>Michael Frith</u></p> <p>Name (type or print): <u>MICHAEL FRITH</u></p>																																				
		<p>Date: <u>10/5/17</u></p> <p>Title: <u>OWNER</u></p>																																				

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