

No. W 158072	Reinstatement Annual Report Form ADMIN DISSOLVED 02/24/2017		2. Registered Agent and Office (NOT A P.O. BOX) CINDY FORTIN 330 MAIN ST YELLOW PINE ID 83677																																			
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. HUCKLEBERRY CAFE, LLC. CINDY FORTIN PO BOX 65 YELLOW PINE ID 83677		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Manager or Member</th> <th style="width:20%;">Name</th> <th style="width:30%;">Street or PO Address</th> <th style="width:10%;">City</th> <th style="width:10%;">State</th> <th style="width:10%;">Country</th> <th style="width:15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td>manager</td> <td>PO Box 65</td> <td>Yellow Pine</td> <td>Ida</td> <td>Valley County</td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td>Cindy Fortin</td> <td>yellow pine</td> <td>Ida.</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 type="checkbox"/>	manager	PO Box 65	Yellow Pine	Ida	Valley County		Manager <input type="checkbox"/> Member <input type="checkbox"/>	Cindy Fortin	yellow pine	Ida.				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 158072	6. Signature: <u>Cindy Fortin</u> Date: <u>3/30/17</u> Name (type or print): <u>Cindy Fortin</u> Title: _____																																					