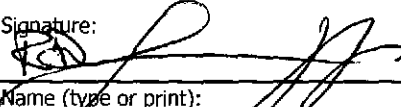


No. <b>W 151618</b>		<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 08/14/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> ROBERT D LAMOREAUX JR 822 N 1100 E SHELLEY ID 83274	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>		1. <b>Mailing Address: Correct in this box if needed.</b> HOME APPEAL LLC ROBERT D LAMOREAUX 822 N 1100 E SHELLEY ID 83274		3. <u>New</u> Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
<b>Manager or Member</b>		<b>Name</b>	<b>Street or PO Address</b>	<b>City</b>	<b>State Country Postal Code</b>
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>		Robert D. Lamoreaux	822 N. 1100 E.	Shelley	ID USA. 83274
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:		6.			
IDAHO W 151618		Signature: 		Date: 5-22-18	
		Name (type or print): Robert D. Lamoreaux		Title: Manager	
Issued 05/22/2018 by online					