

No. <b>W 63892</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 09/22/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> PEGGY L WRIGHT 212 PINE ST GRANGEVILLE ID 83530-1142																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> BACKSTREET TREASURES LLC PEGGY L WRIGHT 212 PINE ST GRANGEVILLE ID 83530-1142 USA		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: 25%;">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: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Peggy L Wright</td> <td>212 Pine St</td> <td>Grangeville</td> <td>Idaho</td> <td></td> <td>83530</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Peggy L Wright	212 Pine St	Grangeville	Idaho		83530	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Peggy L Wright	212 Pine St	Grangeville	Idaho		83530																																
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:  <div style="text-align: center; font-weight: bold; font-size: 1.2em;">IDAHO W 63892</div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <u>Peggy L Wright</u></td> <td style="width: 30%;">Date: <u>10-12-15</u></td> </tr> <tr> <td>Name (type or print): <u>Peggy L Wright</u></td> <td>Title: <u>10-12-15</u></td> </tr> </table>		Signature: <u>Peggy L Wright</u>	Date: <u>10-12-15</u>	Name (type or print): <u>Peggy L Wright</u>	Title: <u>10-12-15</u>																															
Signature: <u>Peggy L Wright</u>	Date: <u>10-12-15</u>																																					
Name (type or print): <u>Peggy L Wright</u>	Title: <u>10-12-15</u>																																					
Issued 09/30/2015 by TLB																																						