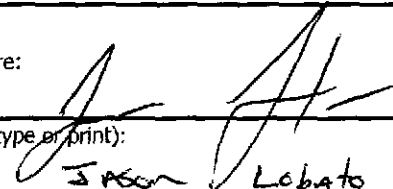
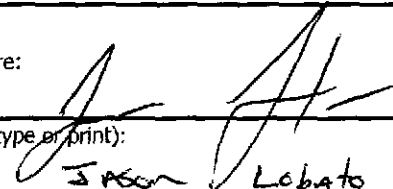
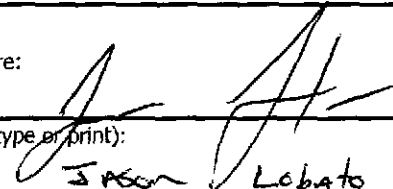


No. <b>W 122642</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/17/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JASON LOBATO <del>567 TWO RIVERS</del> <del>EAGLE ID 83616</del> 3850 W. Rose Hill Boise Id 83705
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 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> BOLD DISTRIBUTION L.L.C. JASON LOBATO <del>567 TWO RIVERS</del> 3850 W. Rose Hill <del>EAGLE ID 83616</del> Boise Id 83705		3. <u>New</u> 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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Jason Lobato	3850 W. Rose Hill	Boise	Id		83705
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;"> <b>IDAHO</b>  <b>W 122642</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: <u>10/6/2015</u> </td> </tr> <tr> <td>           Name (type or print): <u>Jason Lobato</u> </td> <td>           Title: <u>Owner</u> </td> </tr> </table>	Signature: 	Date: <u>10/6/2015</u>	Name (type or print): <u>Jason Lobato</u>	Title: <u>Owner</u>
Signature: 	Date: <u>10/6/2015</u>				
Name (type or print): <u>Jason Lobato</u>	Title: <u>Owner</u>				

Issued 10/06/2015 by DK1

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM