

No. <b>W 167795</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 09/27/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> THOMAS DEAN 609 6TH AVE DEARY ID 83823																																				
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> DEAN'S RENTAL PROPERTY, LLC THOMAS DEAN PO BOX 201 DEARY ID 83823		3. <u>New</u> Registered Agent Signature.																																				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Thomas Dean</td> <td>PO Box 201</td> <td>Deary</td> <td>ID</td> <td>USA</td> <td>83823</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Thomas Dean	PO Box 201	Deary	ID	USA	83823	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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Thomas Dean	PO Box 201	Deary	ID	USA	83823																																	
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:  <b>IDAHO W 167795</b>		6. <table border="1"> <tr> <td>Signature: <i>Thomas L. Dean</i></td> <td>Date: <u>10/9/17</u></td> </tr> <tr> <td>Name (type or print): <u>Thomas Dean</u></td> <td>Title: <u>Member</u></td> </tr> </table>			Signature: <i>Thomas L. Dean</i>	Date: <u>10/9/17</u>	Name (type or print): <u>Thomas Dean</u>	Title: <u>Member</u>																															
Signature: <i>Thomas L. Dean</i>	Date: <u>10/9/17</u>																																						
Name (type or print): <u>Thomas Dean</u>	Title: <u>Member</u>																																						

Issued 10/09/2017 by online