

REINSTATEMENT

No. W 1722	Annual Report Form ADMIN DISSOLVED 02/06/2002	2. Registered Agent and Office NOT A P.O. BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable ME & THEE, LLC ROBBIN STORJOHANN ZAHURAK 1764 BERGESON 4337 S. PINEREST BOISE, ID 83700 83716	ROBBIN STORJOHANN ZAHURAK 1379 E OAKRIDGE DR 4337 S PINEREST BOISE, ID 83746 83716 3. <u>New</u> registered agent signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☒ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>PARTNER</td> <td>ROBBIN ZAHURAK</td> <td>4337 S PINEREST</td> <td>BOISE</td> <td>ID</td> <td>83716</td> </tr> <tr> <td>PARTNER</td> <td>BARBARA KIMBREL</td> <td>2919 SILVERWOOD PL</td> <td>POCATELLO</td> <td>ID</td> <td>83201</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	PARTNER	ROBBIN ZAHURAK	4337 S PINEREST	BOISE	ID	83716	PARTNER	BARBARA KIMBREL	2919 SILVERWOOD PL	POCATELLO	ID	83201
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PARTNER	BARBARA KIMBREL	2919 SILVERWOOD PL	POCATELLO	ID	83201															
5. Organized under the laws of: IDAHO W 1722	6. Signature <u>Robbin Zahurak</u> Date <u>4/16/02</u> Name (Typed or Printed) <u>ROBBIN ZAHURAK</u> Title <u>PARTNER</u>																			

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