

No. W 81622	Reinstatement Annual Report Form ADMIN DISSOLVED 05/25/2016		2. Registered Agent and Office (NOT A P.O. BOX) MARSHALL LUND 4145 E 645 N RIGBY ID 83442
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. LUND SERVICE, LLC MARSHALL LUND PO BOX 780 RIGBY ID 83442		3. <u>New</u> Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00			

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"/>	Marshall Lund PO Box 780 Rigby ID 83442					
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Kristine Lund Po Box 780 Rigby ID 83442					
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;">IDAHO W 81622</div>	6. Signature: <u>Kristine Lund</u> Date: <u>6-9-16</u> <hr/> Name (type or print): <u>Kristine Lund</u> Title: <u>Manager</u>
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Issued 06/09/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct