

FILED EFFECTIVE

No. W 93122	Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014		2. Registered Agent and Office (NOT A P.O. BOX) ERRIKA SAXEY 912 E COVEY RUN COURT EAGLE ID 83616	
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. INNERVOICE GROUP, LLC 912 E COVEY RUN CT EAGLE ID 83616		<i>151 N Lost Canyon Way</i>	
REINSTATEMENT FEE DUE: \$30.00			3. <u>New</u> Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Name <i>Errika Saxe</i>	Street or PO Address <i>151 N Lost Canyon Way</i>	City <i>Eagle</i>	State <i>ID</i> Country <i>USA</i> Postal Code <i>83616</i>
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: IDAHO W 93122	6. Signature: <i>Errika Saxe</i> Name (type or print): <i>Errika Saxe</i>			
	Date: <u>8/22/2014</u> Title: <u>Member</u>			