


No. W 35543	Reinstatement Annual Report Form ADMIN DISSOLVED 03/04/2010		2. Registered Agent and Office (NOT A P.O. BOX) LARRY G FLYNN 8580 PETERSBURG AVE LETHA ID 83636														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. HIDDEN ISLAND, LLC LARRY G FLYNN PO BOX 21 LETHA ID 83636				3. New Registered Agent Signature.												
			4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"><thead><tr><th>Office Held</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><i>Pres</i></td><td><i>Larry Flynn</i></td><td><i>PO Box 21</i></td><td><i>Letha</i></td><td><i>Ida</i></td><td><i>Gen</i></td><td><i>83636</i></td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	<i>Pres</i>	<i>Larry Flynn</i>	<i>PO Box 21</i>	<i>Letha</i>
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5. Organized Under the Laws of: IDAHO W 35543		6. Signatures:  Name (type or print): <i>LARRY FLYNN</i>		Date: <i>3-23-2010</i> Title: <i>Pres</i>													
Issued 03/23/2010 by LJM																	