

FILED

No. W 96755	Reinstatement Annual Report Form ADMIN DISSOLVED 12/09/2011		2. Registered Agent and Office (NOT A P.O. BOX)																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. BUILDING BLOCKS DAY CARE LLC <del>6138 S TETON PEAK WY</del> <del>BOISE ID 83716</del> 6049 S. Teak way Boise, Id 83716		KATHLEEN STONE <del>6138 S TETON PEAK WY</del> <del>BOISE ID 83716</del> 6049 S. Teak way Boise, Id 83716  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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6">Kathleen Stone 6049 S. Teak way Boise, Id 83716</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Kathleen Stone 6049 S. Teak way Boise, Id 83716						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  IDAHO W 96755		6. Signature: <u>Kathleen Stone</u> Date: <u>7-20-17</u> Name (type or print): <u>Kathleen Stone</u> Title: <u>owner</u>																																				
Issued 07/20/2017 by JLI																																						