| Annual Report Form SECRETARY OF STATE TOO WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Names and Addresses of Managers. Office held Name Manual Report Form 1. Mailing Address - Correct in this box. If applicable SMOKE INN, LLC JAY LILES 3912 W. STATE ST BOISE, ID 83703 3. New Registered Agent Signature City Manual Report Form 3. JAY K. LILES 3912 W. STATE ST BOISE, ID 83703 3. New Registered Agent Signature Limited Liability Companies: Enter Names and Addresses of Managers. Street or P.O. Address Manual Report Form 5. Organized Under the Laws of: IDAHO Signature Date Date AT 2-07 Date Date | No. W 5849 | Due no later than March 31, 2007 | 2. Registered Agent and Office NO PO BO |
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| Limited Liability Companies: Enter Names and Addresses of Managers. Limited Liability Companies: Enter Names and Addresses of Managers. City State Zip | Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 | Annual Report Form 1. Mailing Address - Correct in this box, if applicable SMOKE INN, LLC JAY LILES 3912 W. STATE ST | 3912 W. STATE ST BOISE, ID 83703 |
| 5. Organized Under the Laws of: IDAHO 6. Signature Date 3-12-07 | RECEIVED BY DUE DATE Limited Liability Companie Office held Name | es: Enter Names and Addresses of Managers. Street or P.O. Address L(BION, Forture to Boye | State Zip |
| 5. Organized Under the Laws of: IDAHO W 5849 6. Signature Fin 7th Date 3-12-07 Title Owner | | | k og me k væ r mog til stå m Gregoria |
| Name Printed | | | Date 3-12-07 Title owner |