

2/26/2014

W 102113

No. W 102113		Reinstatement Annual Report Form		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		1. Mailing Address: Correct in this box if needed. ST. MARIES BOWL LLC STEVE NEMETH 215 N 10TH ST ST MARIES ID 83861		UNITED STATES CORPORATION AGEN 3006 E GOLDSTONE DR STE 218 MERIDIAN ID 83642 USA																																				
REINSTATEMENT FEE DUE \$30.00				3. New 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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Steve Nemeth</td> <td>215 N 10th St</td> <td>St Maries</td> <td>Id</td> <td>US</td> <td>83861</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Monica Nemeth</td> <td>215 N 10th St</td> <td>St Maries</td> <td>Id</td> <td>US</td> <td>83861</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Steve Nemeth	215 N 10th St	St Maries	Id	US	83861	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Monica Nemeth	215 N 10th St	St Maries	Id	US	83861	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:		6.																																						
IDAHO W 102113		Signature: <u>Monica Nemeth</u>		Date: <u>2/26/14</u>																																				
		Name (type or print): <u>Monica Nemeth</u>		Title: <u>Member</u>																																				
Issued 02/26/2014 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 mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The