

No. W 119861		Reinstatement Annual Report Form ADMIN DISSOLVED 03/21/2017		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. GARNET LLC (THE) JUSTIN MCLANE 313 E WALNUT AVE COEUR D ALENE ID 83814		JUSTIN MCLANE 7633 W COUGAR GULCH RD COEUR D ALENE ID 83814	
REINSTATEMENT FEE DUE: \$30.00				3. New 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	Street or PO Address	City	State Country Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>		JUSTIN MCLANE 4643 SE Cheerio Way Stuart, FL 34997			
Manager <input type="checkbox"/> Member <input type="checkbox"/>		ANGELINE MCLANE 4643 SE Cheerio Way Stuart, FL 34997			
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of: IDAHO W 119861		6.			
		Signature: 		Date: 4-21-17	
		Name (type or print): <u>ANGELINE MCLANE</u>		Title: <u>Member</u>	
Issued 04/28/2017 by online					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM