No. W 182394 Return to:	Reinstatement Annual Report Form ADMIN DISSOLVED 07/23/2018	2. Registered Agent and Office (NOT A P.O. BOX) JASON HOWARD
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1, Mailing Address: Correct in this box if needed. HOWARD EYECARE PLLC JASON HOWARD 2292 W GRAND TETON DR MERIDIAN ID 83646	2292 W GRAND TETON DR MERIDIAN ID 83646
reinstatement fee due: \$30.00		3. <u>New</u> Registered Agent Signature,
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. Manager or Member Name Street or PO Address City State Country Postal Code Manager Member Tascon Howard 2292 W. Grand Telan Or. Members 10 USA 83646 Manager Member M		
5. Organized Under the Lan IDAHO W 182394	Signature: Name (type or print): Sason Howard	Date: // 8/6/18/ Title: Manager