

No. <b>W 53712</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 12/01/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> <del>PATTY CRAFT</del> <i>Elisabeth Halvorson</i> <del>1311 MAIN ST</del> <i>C/O Row Commercial</i> <del>MERIDIAN ID 83642</del> <i>6126 W. State Street</i> <i>Boise, ID 83703</i>
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> SUN HILL LLC <del>C/O ALL ABOUT PROPERTIES</del> <del>1311 MAIN ST</del> <del>MERIDIAN ID 83642</del> <i>Elisabeth Halvorson</i> <i>C/O Row Commercial LLC</i> <i>6126 W. State Street</i> <i>Boise, ID 83703</i>		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 <input type="checkbox"/> Member <input checked="" type="checkbox"/>	<i>Elisabeth Halvorson</i>	<i>85 Granada Drive</i>	<i>Corte Madera</i>	<i>CA</i>	<i>USA</i>	<i>94925</i>
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of:  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 53712</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:             Name (type or print):  <u><i>Elisabeth Halvorson</i></u> </td> <td style="width: 40%;">           Date:  <u><i>10 March 17</i></u>             Title:  <u><i>Member</i></u> </td> </tr> </table>	Signature: Name (type or print): <u><i>Elisabeth Halvorson</i></u>	Date: <u><i>10 March 17</i></u>  Title: <u><i>Member</i></u>
Signature: Name (type or print): <u><i>Elisabeth Halvorson</i></u>	Date: <u><i>10 March 17</i></u>  Title: <u><i>Member</i></u>		

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## 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 office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box**.