

No. <b>W 61017</b>  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>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/28/2017</b>  <b>1. Mailing Address: Correct in this box if needed.</b> HEARTHSTONE LODGE, L.L.C. HARTY SCHMAEHL PO BOX 1492 KAMIAH ID 83536-1492	<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> HARTY SCHMAEHL 3250 HIWAY 12 MP 64 KAMIAH ID 83536  <b>3. <u>New</u> Registered Agent Signature.</b>																																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>																																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td colspan="6">HARTY SCHMAEHL PO BOX 1492, KAMIAH, ID LEWIS 83536</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td colspan="6">MARJORIE F. SCHMAEHL, PO BOX 1492, KAMIAH, ID LEWIS, 83536</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	HARTY SCHMAEHL PO BOX 1492, KAMIAH, ID LEWIS 83536						Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	MARJORIE F. SCHMAEHL, PO BOX 1492, KAMIAH, ID LEWIS, 83536						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  <div style="text-align: center; font-weight: bold;">IDAHO W 61017</div>	<b>6.</b> Signature: <u>Margorie F. Schmaehl</u> Date: <u>7/31/17</u> Name (type or print): <u>Margorie F. Schmaehl</u> Title: <u>manager member</u>																																				
Issued 07/06/2017 by SAT																																					