No. W 124843  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014  1. Mailing Address: Correct in this box if needed. BLIND AUTHORITY, LLC PO BOX 926 HAYDEN ID 83835	2. Registered Agent and Office (NOT A P.O. BOX) JIM FREEMAN 1255 EDGEWOOD CIRCLE COEUR D ALENE ID 83815
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 or Member Name Street or PO Address City State Country Postal Code  Manager Member JIM FREEMAN P.O. 926 HAYDON ID U.S 83835  Manager Member Membe		
5. Organized Under the Law IDAHO W 124843 Issued 09/11/2014 by onlin	Signature:  Name (type or print):  Jim FREEMAN	Date: 9-11-14 Title: 0WNER

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**