4/7/2016 W 122645

No. W 122645	Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2015	2. Registered Agent and Office (NOT A P.O. BOX) MISTY CERIELLO ~~1203 S RIVERSIDE HARBOUR DRIVE POST FALLS ID 83854~~ 5503 E Shoreline Dr. Post Falls, ID 83854
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. PREVEILED LLC MISTY L CERIELLO ~~1203 S RIVERSIDE HARBOUR DRIVE POST FALLS ID 83854~~ 1869 E Seltice Way #288 Post Falls, ID 83854	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

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 ☒	Misty Ceriello	5503 E Shoreline Dr.	Post Falls,	ID	USA	83854
Manager ☐ Member ☒	Janet Sonneborn	310 N Promenade Loop	Post Falls,	ID	USA	83854
Manager ☐ Member ☐						
Manager ☐ Member ☐						

5. Organized Under the Laws of:	6. Signature:	Date:
IDAHO W 122645		4-6-16
	Name (type or print): Misty Ceriello	Title: President