

No. <b>W 168173</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 09/27/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> DAVID MAKA <del>1111 S ORCHARD ST #215</del> BOISE ID 83709 <b>8618 W. Ustick Rd</b> <b>Boise, ID, 83704</b>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. MAKA LLC DAVID MAKA 11030 SHETLAND RD BOISE ID 83709		3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>David Muka</td> <td>8618 W. Ustick</td> <td>Boise</td> <td>ID</td> <td>Ada</td> <td>83704</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	David Muka	8618 W. Ustick	Boise	ID	Ada	83704	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	David Muka	8618 W. Ustick	Boise	ID	Ada	83704																																
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:  <b>IDAHO</b> <b>W 168173</b>		6. Signature: <u><i>David Muka</i></u> Date: <u>7-31-17</u> Name (type or print): <u>David Muka</u> Title: <u>Owner</u>																																				

Issued 07/31/2018 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**