

No. <b>W 88488</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 02/08/2012</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> SHAWNA ALLEN 8614 W CREEKRUN WAY BOISE ID 83714 <i>7325 Riverside Dr.</i>
	1. <b>Mailing Address: Correct in this box if needed.</b> AVEST COMMERCIAL PROPERTIES LLC SHAWNA ALLEN PO BOX 140075 BOISE ID 83714	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>avest limited Partnership Boise ID 83714</i>					
	<i>P.O Box 140034</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-weight: bold;">IDAHO W 88488</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature: <i>Virginia Allen</i> </td> <td style="width: 40%;">           Date: <i>4-30-12</i> </td> </tr> <tr> <td>           Name (type or print): <i>Virginia A. Allen</i> </td> <td>           Title: <i>member</i> </td> </tr> </table>	Signature: <i>Virginia Allen</i>	Date: <i>4-30-12</i>	Name (type or print): <i>Virginia A. Allen</i>	Title: <i>member</i>
Signature: <i>Virginia Allen</i>	Date: <i>4-30-12</i>				
Name (type or print): <i>Virginia A. Allen</i>	Title: <i>member</i>				

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM