No. W 89951	Reinstatement Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX)
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	ADMIN DISSOLVED 04/09/2012  1. Mailing Address: Correct in this box if needed.  STONEHOUSE INK LLC.  AARON PATTERSON  841 W MOUNTAIN ASH LOOP  NAMPA ID 83686	AARON PATTERSON  841 W MOUNTAIN ASH LOOP  NAMPA ID 83686  1235 W BRIAL MOOF DT  BOTE TO 857/3  3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00	12235 W. BRIARWOOD DR BOISC 20 83713	
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		
Manage Member D D	ardal Patterson 12235 No Briar WOOD 1	Attitude to the contract of th
Manager Member	•	j
Manager Wember	•	
Manager Member		
5. Organized Under the Laws o	of: 6. Signature:	Data (1/2 / 12
IDAHO		Date: 4/18/12
W 89951	Name (type or print): AGRON AHERSON	Title: CPO
Issued 04/16/2012 by DK1	<del></del>	

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**