No. W 165707	Reinstatement Annual Report Form ADMIN DISSOLVED 07/26/2017	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	1. Mailing Address: Correct in this box if needed. LENITY, LLC RONALD D SARGENT 20694 HILLCREST DR GREENLEAF ID 83626	RONALD D SARGENT 20694 HILLCREST DR GREENLEAF ID 83626
reinstatement fee due: \$30.00		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 [ Member [ ] Ronald Sargout 20694 Hillcrest Dr. Creculent ID8362 (2014)		
Manager [Member [] Ronald Sargout 20694 Hillcrest Dr. Creculent ID8362 Causer C		
Manager Member C		
Manager Member		
5. Organized Under the La		
IDAHO	Signature:	Date: 4 2018
W 165707	Name (type or print): Theresa F. Schnuerla	May 4,2018 Title: Owner/Operator
		Margager Brusses