
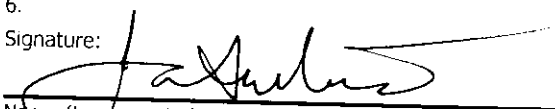


No. W 27647	Reinstatement Annual Report Form ADMIN DISSOLVED 03/10/2014		2. Registered Agent and Office (NOT A P.O. BOX) JOAN PRIGGE 10712 CRUSER ST BOISE ID 83709 JANET WHITE 911 ND STREET PARMA ID 83660
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. J & J MANAGEMENT, LLC JANET WHITE 911 N D STREET PARMA ID 83660 USA		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 checked="" type="checkbox"/> Member <input type="checkbox"/> JOAN PRIGGE 10712 CRUSER ST BOISE, IDA 83709			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> JANET WHITE 911 ND ST PARMA ID 83660			
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; font-size: large;"> IDAHO W 27647 </div>		6. Signature:  Name (type or print): <div style="text-align: center; font-weight: bold; font-size: large;"> JANET WHITE </div>	
Issued 04/22/2014 by SLD		Date: <u>2/2/2015</u> Title: <u>MEMBER</u>	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM