




No. <b>W 31247</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 09/10/2013</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> BRANDI CLARK 1953 SHETLAND AVE POCATELLO ID 83201																																			
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>	1. <b>Mailing Address: Correct in this box if needed.</b> INACCORD SAFETY & HEALTH L.L.C. BRANDI CLARK 1953 SHETLAND AVE POCATELLO ID 83021 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Brandi Clark</td> <td>1953 Shetland Ave</td> <td>Pocatello</td> <td>ID</td> <td>US</td> <td>83201</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"/>	Brandi Clark	1953 Shetland Ave	Pocatello	ID	US	83201	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 31247</div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:   </td> <td style="width: 40%;">           Date:            10-24-16         </td> </tr> <tr> <td>           Name (type or print):            Brandi Clark         </td> <td>           Title:            Manager         </td> </tr> </table>		Signature: 	Date: 10-24-16	Name (type or print): Brandi Clark	Title: Manager																															
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