

No. W 20041	Reinstatement Annual Report Form ADMIN DISSOLVED 10/06/2009		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	<p>1. Mailing Address: Correct in this box if needed.</p> <p>MARK BALL, L.L.C. MARK BALL PO BOX 458 REXBURG ID 83440</p>		
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MARK BALL 2342 S 3600 E REXBURG ID 83440		
3. New Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Name	Street or PO Address	City State Country Postal Code
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	MARK BALL	PO Box 458	REXBURG, ID, 83440
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	CARRIE BALL	PO Box 458	REXBURG, ID, 83440
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:	6.		
IDAHO W 20041	<p>Signature: </p> <p>Name (Type or print): <u>MARK BALL</u></p>		
<p>Date: <u>6-21-13</u></p> <p>Title: <u>PRES</u></p>			

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM