No. W 124453	Reinstatement Annual Report Form ADMIN DISSOLVED 07/21/2015	2. Registered Agent and Office (NOT A P.O. BOX)
Return to:	ADMIN DISSOLVED 07/21/2013	GINNELL HELLHAKE
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. JAVA MAMMAS, LLC GINNELL L HELLHAKE PO BOX 149 MCCALL ID 83638 USA	223 ALTA VISTA MCCALL ID 83638
REINSTATEMENT FEE		3. <u>New</u> Registered Agent Signature.
DUE: \$30.00		
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 Grand Hellhale Passaring M(all Is) Unlley 8:363. Manager Member Member Manager Member Member Manager Member Me		
IDAHO W 124453	Signature:	Date: 6 . 7 . 15
	Ginnell Heilhake	Managing we mbe
Issued 08/07/2015 by onlin	10	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM