

No. W 30889	Reinstatement Annual Report Form ADMIN DISSOLVED 08/31/2016		2. Registered Agent and Office (NOT A P.O. BOX) R BRADLEY SMITH 15 W MAIN ST REXBURG ID 83440																																			
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. CUSTOM AUTO LLC 325 N HOLMES IDAHO FALLS ID 83401																																		
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. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>James Brendle</td> <td>325 N Holmes</td> <td>TWIN FALLS</td> <td>ID</td> <td></td> <td>83401</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Heidi Brendle</td> <td>325 N. Holmes</td> <td>TWIN FALLS</td> <td>ID</td> <td></td> <td>83401</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 checked="" type="checkbox"/>	James Brendle	325 N Holmes	TWIN FALLS	ID		83401	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Heidi Brendle	325 N. Holmes	TWIN FALLS	ID		83401	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: IDAHO W 30889		6. Signature: <u><i>R. Bradley Smith</i></u> Date: <u>3/9/17</u> Name (type or print): <u>Brad Smith</u> Title: <u>Agent</u>																																				