NOT A

No. W 21791  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2008  1. Mailing Address: Correct in this box if needed.	2. Registered Agent and Office (NOT A P.O. BOX) ALLAN R BOSCH 225 N 9TH ST STE 210 BOISE ID 83702
	STAT PADS LLC	
	225 N 9TH ST STE 200 PO Box 2598 BOISE ID 83702 Boise, ID 83701	3. <u>New</u> Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00		
Office Held Nam	The state of the s	City State Country Costa Costa
Member L. T Member J. T	raig Rasmussen 13901 W. Wainwrig Tad Cowley 13901 W. Wainwrig Thomas Ahlquist 13901 W. Wainwrig Tohnson 13901 W. Wainwrig	ht. #A. Boise, ID op//per
		m
5. Organized Under the La	ws of: 6. Signature: R. Cusia Ros	unusky Date: 3/20/08
IDAHO W 21791	Signature: S. Cury Stoss Name (type or print): R. Cearg RA	SMUSSEU TIDE: MENSER
Issued 03/19/2008 by KA		

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. Note: <u>Do not put "same as lest year" or "name as above".</u>

These will not be accepted.

Block 5: May not be altered through the use of this form.

**Block 6:** The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.