| No. W 41659 Return to: | | Due no later than Aug 31, 2011 Annual Report Form | | Registered Agent and Address (NO PO BOX) TREVOR BONFIGLIO | | | |
|---|---|---|---|---|------------|----------------|--|
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing TB CONSTRI TREVOR BO 1408 FAIRVI FRUITLAND | Address: Correct in this box if needed. UCTION, LLC NFIGLIO EW AVE | 1408 FAIRVIEW AVE FRUITLAND ID 83619 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: Ent | r Names and Address | ses of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| | R BONFIGLIO BONFIGLIO | 1408 FAIRVIEW AVE 1408 FAIRVIEW AVE | PAYETTE FRUITLAND | ID ID | USA USA | 83619 83619 | |
| 5. Organized Under the Laws of: 6. Annual | | Annual Report must be signed.* | | | | | |
| ID | Signature: R | tenee Bonfiglio | | Date: 06/13/2011 | | | |
| W 41659 | Name (type | Name (type or print): Renee Bonfiglio | | Title: Manager | | | |
| Processed 06/13/2011 | * Electronically | * Electronically provided signatures are accepted as original signatures. | | | | | |