

No. W 157766	Reinstatement Annual Report Form ADMIN DISSOLVED 01/22/2018		2. Registered Agent and Office (NOT A P.O. BOX) RAY E SANCHEZ 930 W EDWARDS AVE NAMPA ID 83686
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CAR AND DRIVER SERVICE LLC RAY E SANCHEZ 930 W EDWARDS AVE NAMPA ID 83686-2886 USA		3. <u>New</u> Registered Agent Signature.
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 <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/> <u>Ray Sanchez</u> <u>930 W Edwards Ave</u> <u>Nampa</u> <u>Id</u> <u>USA</u> <u>83686</u>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: large;"> IDAHO W 157766 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature: <u>Ray Sanchez</u> Name (type or print): <u>Ray Sanchez</u> </div> <div> Date: <u>3-16-2018</u> Title: <u>MB/MB</u> </div> </div>	
Issued 03/16/2018 by JLI			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM