


<b>No. W 115196</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE          DUE: \$30.00</b>	<b>Reinstatement Annual Report Form          ADMIN DISSOLVED 09/10/2013</b>	2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> DAVID ADAMSON JR 1320 SMITH AVE NAMPA ID 83651  <div style="text-align: center;">           3. <u>New</u> Registered Agent Signature.       </div>																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 5%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Dave Adamson Jr</td> <td>3563 N. Arrowood</td> <td>Meridian</td> <td>ID</td> <td>USA</td> <td>83646</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Dave Adamson Sr</td> <td>1320 Smith Ave</td> <td>Nampa</td> <td>ID</td> <td>US</td> <td>83651</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Dave Adamson Jr	3563 N. Arrowood	Meridian	ID	USA	83646	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Dave Adamson Sr	1320 Smith Ave	Nampa	ID	US	83651	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:  <div style="text-align: center;"> <b>IDAHO W 115196</b> </div>	6. Signature: <u>Dave Adamson</u> Date: <u>10/8/2013</u> Name (type or print): <u>Dave Adamson</u> Title: <u>Member</u>																																				

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM