

No. W 49036		Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2007		2. Registered Agent and Office (NOT A P.O. BOX)	
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. FOUR POINTS CONSTRUCTION, LLC ROBERT HENRY PAASCH 211 2ND ST WILDER ID 83676		ROBERT HENRY PAASCH 211 2ND ST WILDER ID 83676	
REINSTATEMENT FEE DUE: \$30.00		Robert W. Paasch POBox 8 Wilder ID 83676		Robert W. Paasch 20705 Travis Rd. Wilder ID 83676	
3. New 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 type="checkbox"/> Member <input checked="" type="checkbox"/>		Robert W. Paasch POBox 8 Wilder, ID US 83676			
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:		6.		Date:	
IDAHO W 49036		Signature: 		<u>4/6/16</u>	
		Name (type or print): <u>Robert W. Paasch</u>		Title: <u>Principal</u>	

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM