No. W 178783	Reinstatement Annual Report Form ADMIN DISSOLVED 06/29/2018	2. Registered Agent and Office (NOT A P.O. BOX) JOSHUA CONNELL 7936 W HUMMELL DR (1605 W BOISE ID 83709 Highdunder Ru
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 63720 BOISE, ID 83720-0080	1. Malling Address: Correct in this box if needed. JOSH CONNELL REAL ESTATE LLC JOSHUA CONNELL 7936 W HUMMELL DR 11605 W Highlander RJ BOISE ID 83709	
REINSTATEMENT FEE DUE: \$30.00		3. <u>New</u> Registered Agent Signature.
Manager or Member	Companies: Enter Names and Addresses of Manage Name Street or PO Address Ci Teshwa Connell 11605 W Highlander Rd B	ty State Country Bostal Code
5. Organized Under the Lar IDAHO W 178783	Name (type or print): Joshua Connell	Date: 7/11/18 Title: Manager
Issued 07/11/2018 by onlin		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing 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.