


No. W 126570	Reinstatement Annual Report Form ADMIN DISSOLVED 09/23/2014		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 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ODYSSEY HOMES OF THE NORTHWEST, LLC 5660 E FRANKLIN RD STE 201 NAMPA ID 83687		IVAN CASTILLO-TERAN 2115 W HABITAT ST NAMPA ID 83651 3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Salvador Rodriguez</td> <td>8985 Bowmont Rd., Nampa,</td> <td>ID</td> <td>USA</td> <td>83686</td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Ivan Castillo -Teran</td> <td>2115 W. Habitat St., Nampa,</td> <td>ID</td> <td>USA</td> <td>83651</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> <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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Salvador Rodriguez	8985 Bowmont Rd., Nampa,	ID	USA	83686		Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Ivan Castillo -Teran	2115 W. Habitat St., Nampa,	ID	USA	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: IDAHO W 126570	6. Signature:  Name (type or print): Salvador Rodriguez		Date: 11/14/14 Title: Manager																																			
Issued 11/14/2014 by online																																						