




No. W 62304	Reinstatement Annual Report Form ADMIN DISSOLVED 08/14/2017		2. Registered Agent and Office (NOT A P.O. BOX) DAVID J SCHWULST 311 MCLEAN AVE SODA SPRINGS ID 83276																																			
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. SCHWULST CONSTRUCTION, LLC DAVID J SCHWULST BOX 463 SODA SPRINGS ID 83276		3. <u>New</u> Registered Agent Signature.																																			
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: 20%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 20%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>DAVID Schwulst</td> <td>Box 463 SODA SPRING</td> <td>FD</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> <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> <div style="text-align: right; margin-top: 10px;"> CARIBOO COUNTY 83276 </div>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	DAVID Schwulst	Box 463 SODA SPRING	FD				Manager <input type="checkbox"/> Member <input type="checkbox"/>							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; font-weight: bold;"> IDAHO W 62304 </div>		6. <table style="width: 100%;"> <tr> <td style="width: 50%;"> Signature:  </td> <td style="width: 50%;"> Date: <u>8/29/17</u> </td> </tr> <tr> <td> Name (type or print): <u>DAVID Schwulst</u> </td> <td> Title: <u>OWNER</u> </td> </tr> </table>		Signature: 	Date: <u>8/29/17</u>	Name (type or print): <u>DAVID Schwulst</u>	Title: <u>OWNER</u>																															
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Issued 08/29/2017 by online