

No. W 125852	Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014			
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. ROMERO TRANSPORT LLC PO BOX 505 SUGAR CITY ID 83448		2. Registered Agent and Office (NOT A P.O. BOX) SANTIAGO ROMERO 115 N FRONT ST SUGAR CITY ID 83448	
REINSTATEMENT FEE DUE: \$30.00			3. <u>New</u> 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 checked="" type="checkbox"/> Member <input type="checkbox"/>	SANTIAGO ROMERO	P. O. BOX 505	10 MADISON	83448 SUGAR CITY,
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	EMMA ACOSTA	P. O. BOX 505	SUGAR CITY	10 MADISON 83448
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
5. Organized Under the Laws of:	6.			
IDAHO W 125852	Signature: <u>X Santiago Romero</u>			
	Name (type or print): <u>SANTIAGO ROMERO</u>			
	Date: <u>9/2/14</u>			
	Title: <u>MANAGER</u>			

Issued 08/20/2014 by online

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