
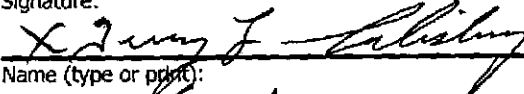


No. W 76332	Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2011		2. Registered Agent and Office (NOT A P.O. BOX) TERRY SALISBURY 2020 BITTERROOT DR TWIN FALLS ID 83301
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. SOUTH RIM REMODELERS, L.L.C. TERRY L SALISBURY 2020 BITTERROOT DR TWIN FALLS ID 83301 USA		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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Terry Salisbury	2020 Bitterroot Dr Twin Falls ID	83301
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: <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 76332</div>		6. Signature:  <hr/> Name (type or print): Terry Salisbury	
		Date: 8-8-14 <hr/> Title: Member	
Issued 07/21/2014 by online			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM