




No. W 99434	Reinstatement Annual Report Form ADMIN DISSOLVED 04/14/2014		2. Registered Agent and Office (NOT A P.O. BOX) DENNIS L TAYLOR 722 THICKET WY IDAHO FALLS ID 83404																									
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. TAYLOR'D 2 PAINTING LLC 722 THICKET WAY IDAHO FALLS ID 83404																											
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 checked="" type="checkbox"/></td> <td>Dennis Taylor</td> <td colspan="5" rowspan="3">> 722 Thicket Way Idaho Falls, ID 83404</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Stacey Mason</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td colspan="5"></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Dennis Taylor	> 722 Thicket Way Idaho Falls, ID 83404					Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Stacey Mason	Manager <input type="checkbox"/> Member <input type="checkbox"/>		Manager <input type="checkbox"/> Member <input type="checkbox"/>							3. <u>New</u> Registered Agent Signature.
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5. Organized Under the Laws of: IDAHO W 99434		<table border="1"> <tr> <td> Signature:  Name (type or print): <u>Dennis L. Taylor</u> </td> <td> Date: <u>5/6/14</u> Title: <u>owner</u> </td> </tr> </table>		Signature:  Name (type or print): <u>Dennis L. Taylor</u>	Date: <u>5/6/14</u> Title: <u>owner</u>																							
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM