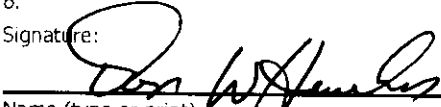


No. <b>W 116177</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 12/01/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> DON W HAWKES 1486 PEACH ST BLACKFOOT ID 83221
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> SOUND CLEANING AND RESTORATION LLC. 1486 PEACH ST BLACKFOOT ID 83221		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"/>	DON W. HAWKES 1486 PEACH ST BLACKFOOT ID. BINGHAM 83221					
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;"> <b>IDAHO</b>  <b>W 116177</b> </div>	6. Signature:  <hr/> Name (type or print): <u>DON W. HAWKES</u> <div style="float: right; text-align: right;">           Date: <u>1/20/15</u>            Title: _____         </div>
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Issued 01/20/2015 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 correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**