

No. W 116177		Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014			2. Registered Agent and Office (NOT A P.O. BOX) 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		1. Mailing Address: Correct in this box if needed. SOUND CLEANING AND RESTORATION LLC. 1486 PEACH ST BLACKFOOT ID 83221			3. New Registered Agent Signature.		
REINSTATEMENT FEE DUEDUE: \$30.00							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>		Name	Street or PO Address	City	State	Country	Postal Code
Manager <input type="checkbox"/> Member <input 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: IDAHO W 116177		6. Signature:  Name (type or print): <u>Don W. Hawkes</u>					
		Date: <u>1/20/15</u>					
		Title: <u></u>					
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.**