

No. W 73295	Reinstatement Annual Report Form ADMIN DISSOLVED 07/12/2011		2. Registered Agent and Office (NOT A P.O. BOX)															
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. A & S MASONRY, LLC PO BOX 688 RIGBY ID 83442		SERGIO F GUZMAN 198 N 3400 E RIGBY ID 83442															
			3. <u>New</u> Registered Agent Signature.															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 35%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 5%;">State</th> <th style="width: 5%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="radio"/> Member <input checked="" type="radio"/></td> <td>Maria A. Rodriguez</td> <td>PO Box 688</td> <td>Rigby</td> <td>ID</td> <td>Jefferson</td> <td>83442</td> </tr> </tbody> </table>					Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="radio"/> Member <input checked="" type="radio"/>	Maria A. Rodriguez	PO Box 688	Rigby	ID	Jefferson	83442
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5. Organized Under the Laws of: IDAHO W 73295	6. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <u>Maria A. Rodriguez</u></td> <td style="width: 30%;">Date: <u>8-3-11</u></td> </tr> <tr> <td>Name (type or print): <u>Maria A Rodriguez</u></td> <td>Title: <u>8-3-11</u></td> </tr> </table>				Signature: <u>Maria A. Rodriguez</u>	Date: <u>8-3-11</u>	Name (type or print): <u>Maria A Rodriguez</u>	Title: <u>8-3-11</u>										
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Issued 08/02/2011 by JL1																		

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** **Do not** put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.