No. W 18136	Reinstatement Annual Report Form ADMIN DISCOLVED OF (25 (2016) (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET	ADMIN DISSOLVED 05/25/2016 1. Mailing Address: Correct in this box if needed. SACLE CONSTRUCTION ALCO. SACLE CONSTRUCTION ALCO.
PO BOX 83720 BOISE, ID 83720-0080	SAGLE CONSTRUCTION, LLC SYDNEY L GUTIERREZ 319 CHURCH ST SANDPOINT ID 83864 3. New Registered Agent Signature
REINSTATEMENT FEE DUE: \$30.00	Lefal new Signature
4. Limited Liability Companies: Enter Names and Addresses of Manager's OR Members. See Instructions. Manager or Member Name Street or PO Address City State Country Postal Code	
Manager Member 🚾 🏻 M	ichael D. Perry P.O. Box 334, Sagle, ID 83860
Manager Member 😾 🏾 🤻	athleen S. Perry P.O. Box 334, Sagle, ID 83860
Manager Member	
Manager Member	
5. Organized Under the Laws of: 6.	
IDAHO W 18136	Name (kype or print): Date: Continue C
	Sydnov A. Cutiotron

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Issued 05/16/2017 by TLB