


No. W 135529	Reinstatement Annual Report Form ADMIN DISSOLVED 06/23/2016																																				
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. J2A HOLDINGS, LLC JASON ANDERSON 3270 E 17TH ST #231 AMMON ID 83406	2. Registered Agent and Office (NOT A P.O. BOX) JASON ANDERSON 525 WEST ELVA STREET IDAHO FALLS ID 83402																																			
		3. New Registered Agent Signature.																																			
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 type="checkbox"/></td><td>Jason Anderson</td><td>3270 E 17th Street</td><td>Ammon</td><td>ID</td><td>banneville</td><td>83406</td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Jason Anderson	3270 E 17th Street	Ammon	ID	banneville	83406	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 135529	6. Signature:  Name (type or print): <u>Jason Anderson</u> Date: <u>6-29-16</u> Title: <u>Member</u>																																				

Issued 06/29/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM