

No. W 38368	Reinstatement Annual Report Form ADMIN DISSOLVED 07/10/2013		2. Registered Agent and Office (NOT A P.O. BOX) MARCOS SOTELO 3993 E WINTERBERRY DR NAMPA ID 83687
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. MARCOS SOTELO SIDING, LLC. MARCOS SOTELO 90 MCCLURE AVE STE A 3993 E Winterberry DR NAMPA ID 83687 <div style="text-align: right; font-size: 1.2em;">Nampa ID 83687</div>		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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Marcos A Sotelo Perez	3993 E Winterberry DR	Nampa	ID		83687
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Angela J Sotelo	3993 E Winterberry DR	Nampa	ID		83687
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; font-size: 1.2em;">IDAHO W 38368</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: Name (type or print): Angela J Sotelo </td> <td style="width: 40%;"> Date: Jan. 5, 2015 Title: Assistant </td> </tr> </table>	Signature: Name (type or print): Angela J Sotelo	Date: Jan. 5, 2015 Title: Assistant
Signature: Name (type or print): Angela J Sotelo	Date: Jan. 5, 2015 Title: Assistant		

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