



No. W 154667	Reinstatement Annual Report Form ADMIN DISSOLVED 11/03/2016		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. CORDILLERA II, LLC DAVE SCAGGS 1341 S SPRING VALLEY DR NAMPA ID 83686 9408 W. Burnett Dr. Boise Id 83709	THOMAS J. ANGSTMAN 3649 N LAKEHARBOR LN BOISE ID 83703 Dario Scaggs 9408 W. Burnett Dr. Boise Id 83709 3. <u>New</u> 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 type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Dario Scaggs</td> <td>9408 W. Burnett Dr.</td> <td>Boise</td> <td>Id</td> <td>Ada</td> <td>83709</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Kirk Hanson</td> <td>2989 S. Pajaro</td> <td>Engle</td> <td>Id</td> <td>Ada</td> <td>83616</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Dario Scaggs	9408 W. Burnett Dr.	Boise	Id	Ada	83709	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Kirk Hanson	2989 S. Pajaro	Engle	Id	Ada	83616	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 154667	6. Signature:  Name (type or print): <u>Dario Scaggs</u> Date: <u>1/17/17</u> Title: <u>member</u>																																					