


No. W 142431	Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2015		2. Registered Agent and Office (NOT A P.O. BOX) BENITO JUAREZ 156 E 200 S JEROME ID 83338
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. VISTA LANDSCAPING, LLC BENITO JUAREZ 156 E 200 S JEROME ID 83338		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"/>	Benito Juarez	156 E 200 S.	Jerome, ID	U.S.		83338
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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;"> IDAHO W 142431 </div>	6. Signature: <div style="text-align: center;">  <hr/> Name (type or print): Benito Juarez </div> <div style="text-align: right; margin-top: 10px;"> Date: <u>1-12-2016</u> Title: <u>Owner</u> </div>
---	--

Issued 01/07/2016 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. See instructions for details.