

No. W 79439		Reinstatement Annual Report Form ADMIN DISSOLVED 02/10/2015		2. Registered Agent and Office (NOT A P.O. BOX) CORNELL HENDERSON 2225 TASCILE LN POCATELLO ID 83204	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. R. JAY & CORNELL SNOWREMOVAL, LC R. JAY HENDERSON 2437 BRUCE POCATELLO ID 83201 USA		3. <u>New Registered Agent Signature.</u>	
REINSTATEMENT FEE DUE: \$30.00					
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"/>		R. Jay Henderson 2437 Bruce Pocatello Id 83201			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>		Cornell Henderson 2225 Tascile Pocatello Id 83204			
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of:		6.			
IDAHO W 79439		Signature:  Name (type or print): <u>R. Jay Henderson</u>			
		Date: <u>10/7/2015</u> Title: _____			
Issued 10/08/2015 by TLB					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM