

No. W 73534	Reinstatement Annual Report Form ADMIN DISSOLVED 07/11/2012		2. Registered Agent and Office (NOT A P.O. BOX) PACIFIC REGISTERED AGENTS INC 7148 N AARON ST COEUR D ALENE ID 83815 USA																																			
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. CHAVEZ HOOFF TRIMMING, LLC SERGIO CHAVEZ 1745 GILLETTE RD GOODING ID 83330 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%; text-align: left;">Manager or Member</th> <th style="width: 20%; text-align: left;">Name</th> <th style="width: 30%; text-align: left;">Street or PO Address</th> <th style="width: 10%; text-align: left;">City</th> <th style="width: 10%; text-align: left;">State</th> <th style="width: 10%; text-align: left;">Country</th> <th style="width: 15%; text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Sergio Chavez</td> <td>1745 Gillette Rd</td> <td>Gooding</td> <td>ID</td> <td>USA</td> <td>83330</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"/>	Sergio Chavez	1745 Gillette Rd	Gooding	ID	USA	83330	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: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 73534 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Sergio Chavez</div> </td> <td style="width: 40%;"> Date: <div style="border-bottom: 1px solid black; padding-bottom: 5px;">10-1-12</div> </td> </tr> <tr> <td> Name (type or print): <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Sergio Chavez</div> </td> <td> Title: <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Manager</div> </td> </tr> </table>			Signature: <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Sergio Chavez</div>	Date: <div style="border-bottom: 1px solid black; padding-bottom: 5px;">10-1-12</div>	Name (type or print): <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Sergio Chavez</div>	Title: <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Manager</div>																															
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM