

No. W 149234	Reinstatement Annual Report Form ADMIN DISSOLVED 06/23/2016		2. Registered Agent and Office (NOT A P.O. BOX) ZYMBER ALIV 10831 W MARLINWOOD DR BOISE ID 83713 2679 N. Ridge Haven Way Meridian, ID 83646
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. A TO Z TRANSPORTATION L.L.C. ZYMBER ALIV 10831 W MARLINWOOD DR BOISE ID 83713 2679 N. Ridge Haven Way Meridian, ID 83646		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"/> ZYMBER ALIV 2679 N. Ridge Haven Way Meridian ID 83646			
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; font-weight: bold;"> IDAHO W 149234 </div>		6. Signature: <div style="text-align: center; font-weight: bold;"> ZYMBER ALIV </div> Date: 07/10/18 Name (type or print): <div style="text-align: center;"> Zaliv </div> Title: <div style="text-align: center;"> mgr </div>	

FILED

Issued 07/10/2018 by JL1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM