



No. <b>W 118235</b>	<b>Reinstatement Annual Report Form</b>		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  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. NEW EDGE MAINTENANCE AND CONST. L.L.C. 911 S BROOK TROUT WY MERIDIAN ID 83642  3615 N Weston Way Meridian ID 83646	<del>MARK HUNTER</del> <del>911 S BROOK TROUT WY</del> <del>MERIDIAN ID 83642</del> Colt Downing 3615 N. Weston Way Meridian ID 83646  3. New 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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Colt Downing</td> <td>3615 N weston way</td> <td>Meridian</td> <td>ID</td> <td></td> <td>83646</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"/>	Colt Downing	3615 N weston 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"/>						
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5. Organized Under the Laws of:  <b>IDAHO W 118235</b>	6. Signature:  Name (type or print): <u>Colt Downing</u> Date: <u>2-4-14</u> Title: <u>Owner</u>																																					

ADA

Issued 02/04/2014 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**