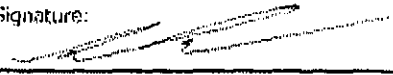


10/2/2017

W 166185

No. W 166185	Reinstatement Annual Report Form ADMIN DISSOLVED 08/14/2017		2. Registered Agent and Office (NOT A P.O. BOX) ANTHONY S NESTOR 3825 N RAMSEY #1402 COEUR D ALENE ID 83815 1103 E. Lakeside Ave COEUR d'Alene, ID, 83814																																			
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. NESTOR LLC (THE) ANTHONY S NESTOR 3825 N RAMSEY #1402 COEUR D ALENE ID 83815 1103 E. Lakeside Ave COEUR d'Alene, ID, 83814																																					
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 ☒ Member ☐</td> <td>Anthony NESTOR</td> <td>1103 E Lakeside Ave</td> <td>COEUR D ALENE</td> <td>ID</td> <td></td> <td>83814</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☐	Anthony NESTOR	1103 E Lakeside Ave	COEUR D ALENE	ID		83814	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 166185		6. Signature:  Date: <u>Oct 1, 2017</u> Name (type or print): <u>Anthony S NESTOR</u> Title: <u>owner</u>																																				

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