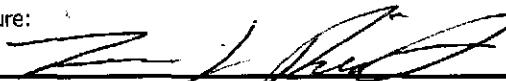


| | | | | | | | |
|---|--|---|----------------------|------|---|---------|-------------|
| No. W 31486 | | Reinstatement Annual Report Form ADMIN DISSOLVED 09/27/2017 | | | 2. Registered Agent and Office (NOT A P.O. BOX) JOSE LUIS RODRIGUEZ JR 13809 LAKESHORE DR NAMPA ID 83686 | | |
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. RODRIGUEZ DRYWALL, LLC JOSE RODRIGUEZ 13809 LAKESHORE DR NAMPA ID 83686 | | | 3. New Registered Agent Signature. | | |
| REINSTATEMENT FEE DUEDUE: \$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 type="checkbox"/> Member <input checked="" type="checkbox"/> | | Jose Rodriguez 13809 Lakeshore Dr Nampa 83686 | | | | | |
| 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: IDAHO W 31486 | | 6. Signature:  Name (type or print): <u>Jose L. Rodriguez</u> | | | Date: <u>10/5/17</u> Title: <u>Owner</u> | | |
| Issued 10/05/2017 by online | | | | | | | |