



W 151017

<https://sos.idaho.gov/CorpPrintForm/display.aspx?enum=W15...>

No. W 151017	Reinstatement Annual Report Form ADMIN DISSOLVED 07/28/2016		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 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. JADYNN UNIT 1, LLC KURT ANDERSON- Andersen PO BOX 1138 P.O. Box 1025 RATHDRUM ID 83858		KURT ANDERSON - Andersen 13867 W HWY 53 RATHDRUM ID 83858 c/o Cusack Law 320 E. Neider Ave #206 Cda, ID 83815	
			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"/>	Kurt Andersen	P.O. Box 1025	Rathdrum Idaho	USA
Manager <input type="checkbox"/> Member <input type="checkbox"/>	83858			
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 151017		6. Signature:  Date: 2017-11-20 Name (type or print): Kurt Andersen Title: Manager		
Issued 11/20/2017 by online				