


| No. <b>W 44439</b>  | <b>Reinstatement Annual Report Form</b><br><b>ADMIN DISSOLVED 02/10/2015</b>   |  | 2. Registered Agent and Office<br><b>(NOT A P.O. BOX)</b><br><br>RYAN FOSTER<br>5418 W 65TH SOUTH<br>IDAHO FALLS ID 83402-5741 |                   |         |                      |      |       |         |             |   |             |               |             |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|-------------------|---------|----------------------|------|-------|---------|-------------|---|-------------|---------------|-------------|----|-----|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT FEE</b><br><b>DUE: \$30.00</b>   | 1. <b>Mailing Address: Correct in this box if needed.</b><br>FOSTERS PLUMBING, LLC.<br>RYAN FOSTER<br>5418 W 65TH SOUTH<br>IDAHO FALLS ID 83402-5741 USA |  | 3. <u>New</u> Registered Agent Signature.  |                   |         |                      |      |       |         |             |   |             |               |             |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.   |  |  |  |                   |         |                      |      |       |         |             |   |             |               |             |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 20%;">Name</th> <th style="text-align: left; width: 25%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Ryan Foster</td> <td>5418 W 65th S</td> <td>Idaho Falls</td> <td>ID</td> <td>USA</td> <td>83402</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"/> | Ryan Foster | 5418 W 65th S | Idaho Falls | ID | USA | 83402 | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  |
| Manager or Member   | Name   | Street or PO Address   | City   | State             | Country | Postal Code          |      |       |         |             |   |             |               |             |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>   | Ryan Foster  | 5418 W 65th S  | Idaho Falls  | ID                | USA     | 83402                |      |       |         |             |   |             |               |             |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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:<br><br><div style="text-align: center; font-weight: bold; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">W 44439</div>  |  | 6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;">           Signature:<br/> <br/> <hr/>           Name (type or print):<br/>           Ryan Foster         </div> <div style="width: 35%;">           Date:<br/>           2/18/15<br/> <hr/>           Title:<br/>           owner         </div> </div> |  |                   |         |                      |      |       |         |             |   |             |               |             |    |     |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM