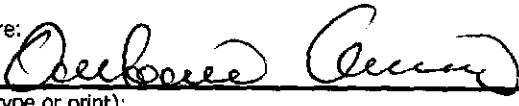
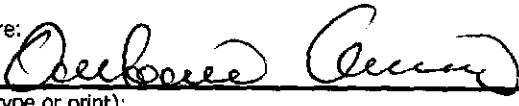
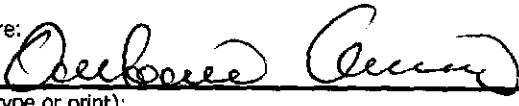


No. W 120600	Reinstatement Annual Report Form ADMIN DISSOLVED 04/14/2014		2. Registered Agent and Office (NOT A P.O. BOX) ANTONIO GUERRERO 3006 E ROSSO PL CALDWELL ID 83605																												
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ANGEL'S STUCCO LLC 3006 E ROSSO PL CALDWELL ID 83605		3. <u>New</u> Registered Agent Signature.																												
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																															
<table border="0" style="width: 100%;"> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																					
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																									
<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;"> Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> </td> <td colspan="6"> Antonio Guerrero 3006 E. Rosso Pl Caldwell, Id 83605 </td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> <tr> <td> Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> </table>				Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Antonio Guerrero 3006 E. Rosso Pl Caldwell, Id 83605						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: <div style="text-align: center; font-size: large;"> IDAHO W 120600 </div>		6. <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>5-01-14</u> </td> </tr> <tr> <td> Name (type or print): <u>Antonio Guerrero</u> </td> <td> Title: <u>owner</u> </td> </tr> </table>		Signature: 	Date: <u>5-01-14</u>	Name (type or print): <u>Antonio Guerrero</u>	Title: <u>owner</u>																								
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Issued 04/28/2014 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**