

No. W 179353		Reinstatement Annual Report Form ADMIN DISSOLVED 06/29/2018																																								
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. CCCC RIP, LLC 18208 N POPE RD HAYDEN ID 83835 14651 N. Reflection Rd. Rathdrum, ID 83858																																								
REINSTATEMENT FEE DUE: \$30.00		2. Registered Agent and Office (NOT A P.O. BOX) CHRIS RIPATTI 18208 N POPE RD 14651 N. Reflection Rd. HAYDEN ID 83835 Rathdrum ID 83858																																								
		3. New Registered Agent Signature.																																								
FILED																																										
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 <input type="checkbox"/></td> <td>Chris Ripatti</td> <td>14651 N. Reflection Rd.</td> <td>Rathdrum</td> <td>ID USA</td> <td></td> <td>83858</td> </tr> <tr> <td>Manager <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/></td> <td><input type="checkbox"/></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 type="checkbox"/>	Chris Ripatti	14651 N. Reflection Rd.	Rathdrum	ID USA		83858	Manager <input type="checkbox"/>	<input type="checkbox"/>						Manager <input type="checkbox"/>	<input type="checkbox"/>						Manager <input type="checkbox"/>	<input type="checkbox"/>					
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5. Organized Under the Laws of: IDAHO W 179353		6. Signature:  Name (type or print): <u>Chris Ripatti</u> Date: <u>7-16-18</u> Title: <u>Pres</u>																																								

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