No. W 62621	Reinstatement Annual Report Form ADMIN DISSOLVED 08/10/2011	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	1. Mailing Address: Correct in this box if needed. VISION CONSTRUCTION AND REAL ESTATE LLC ~~4581 MADISON RIVER RD~~ IDAHO ~~FALLS~~ ID 83401 1184 Oakmeadow Ammon ID 83406	AARON M O'CONNOR ~~122 CLUBHOUSE CIR APT 201~~ IDAHO ~~FALLS~~ ID 83401 1184 Oakmeadow Ammon ID 83406
REINSTATEMENT FEE DUE: $30.00		3. New 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 ☐ Member ☒	Aaron O'Connor	1184 Oakmeadow	Ammon	ID	Bonn	83406
Manager ☐ Member ☐						
Manager ☐ Member ☐						
Manager ☐ Member ☐						

5. Organized Under the Laws of:	6. Signature:	Date:
IDAHO W 62621	Name (type or print): Aaron O'Connor	6/27/12 Title: member

Issued 06/27/2012 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM