


No. <b>W 108583</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 02/23/2016</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> GEORGE D'ANGELO 3525 HOTSPRINGS RD CHALLIS ID 83226
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> GEOLOGIX, LLC GEORGE D'ANGELO PO BOX 158 CHALLIS ID 83226		3. <u>New</u> Registered Agent Signature.
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			

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 type="checkbox"/> Member <input checked="" type="checkbox"/>	George D'Angelo	POBox 158	Challis	ID		83226
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:  <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 108583</div>	6. Signature:  <hr/> Name (type or print): <div style="text-align: center;">George D'Angelo</div>	Date: <div style="text-align: center;">5/1/2016</div> <hr/> Title: <div style="text-align: center;">Member</div>
---	--	--

Issued 05/02/2016 by online

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM