



2/2018

W 162399

No. W 162399		Reinstatement Annual Report Form ADMIN DISSOLVED 05/31/2018		2. Registered Agent and Office (NOT A P.O. BOX) ALBERTO CANELA 728 S COMMERCIAL AVE EMMETT ID 83617 <i>Tax Express, LLC</i> <i>409 E. Greenhurst Rd</i> <i>Nampa ID 83686</i>																																				
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. C. J. SIDING LLC ALBERTO CANELA 728 S COMMERCIAL AVE EMMETT ID 83617		3. New Registered Agent Signature. <i>Dan Giannuzzi, Mgr.</i>																																				
REINSTATEMENT FEE DUE: \$30.00																																								
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 checked="" type="checkbox"/> Member <input type="checkbox"/></td><td>Alberto Canela</td><td>728 S. Commercial Ave</td><td>Emmett</td><td>ID</td><td></td><td>83617</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"/>	Alberto Canela	728 S. Commercial Ave	Emmett	ID		83617	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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Issued 07/12/2018 by online

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.