No. C 143612 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Apr 30, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. AMERICAN TOWER DELAWARE CORPORATION CORPORATE LEGAL 116 HUNTINGTON AVE 11TH FL BOSTON MA 02116 USA		2. Registered A	2. Registered Agent and Address (NO PO BOX)					
				921 S ORCH BOISE ID	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*					
4. Corporations: Enter Nam	nes and Busin	ess Addresses of Pr	resident, Secretary, and Directors. Treasu	rer (optional).						
Office Held	Name		Street or PO Address	City	State	Country	Postal Code			
PRESIDENT	JAMES D. TAICLET, JR.		116 HUNTINGTON AVE.	BOSTON	MA	USA	02116			
SECRETARY	OR JAMES D. TAICLET, JR.		116 HUNTINGTON AVENUE	BOSTON	MA	USA	02116			
DIRECTOR			116 HUNTINGTON AVENUE	BOSTON	MA	USA	02116			
DIRECTOR			116 HUNTINGTON AVENUE	BOSTON	MA	USA	02116			
5. Organized Under the Laws of: 6. A		6. Annual Report must be signed.*								
DE C 143612		Signature: Chad J. Lindner			Date: 04/25/2016					
		Name (type or print): Chad J. Lindner			Title: Asst. Secy					
Processed 04/25/2016		* Electronically provided signatures are accepted as original signatures.								

No. C 155058		Due no later than Jun 30, 2018		2	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. LA FIESTA MEXICAN RESTAURANT, INC. 201 CANYON CREST DR STE 100 TWIN FALLS ID 83301		_	TROY MAHLKE 201 CANYON CREST DR STE 100 TWIN FALLS ID 83301 3. New Registered Agent Signature:*				
NO FILING RECEIVED BY I 4. Corporations: Enter	DUE DATE	iness Addresses o	of President, Secretary, and Directors. Trea	easurer (o	otional).				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code	
PRESIDENT	GLICERIO	ESTRADA	864 CHASE DR		TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*							
ID C 155058		Signature: troy mahlke			Date: 04/26/2018				
		Name (type or print): troy mahlke			Title: accountant				
Processed 04/26/2018	}	* Electronically	provided signatures are accepted as origin	inal signat	ures.				