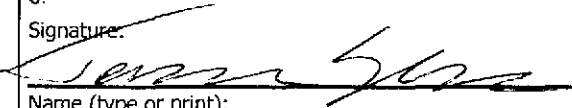


No. W 45367	Reinstatement Annual Report Form ADMIN DISSOLVED 03/27/2018		2. Registered Agent and Office (NOT A P.O. BOX) TAD SHERMAN 1967 EAGLE CREEK EAGLE ID 83616-8361
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. TS CONSTRUCTION LLC. TAD SHERMAN 1967 EAGLE CREEK EAGLE ID 83616		3. <u>New</u> 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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>	TAO Sherman	1967 Eagle Creek	Eagle	ID	US	83616
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; margin-top: 20px;"> IDAHO W 45367 </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature:  Name (type or print): <u>TAD Sherman</u> </div> <div style="width: 35%;"> Date: <u>9/12/18</u> Title: <u>Owner</u> </div> </div>
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Issued 04/12/2018 by JL1