

No. W 31977 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 10/10/2006 1. Mailing Address: Correct in this box if needed. RIVER CITY SMALL ENGINE REPAIR LLC NEIL K CROUSE 3495 W RIDGE DR POST FALLS ID 83854	2. Registered Agent and Office (NOT A P.O. BOX) NEIL K CROUSE 3495 W RIDGE DR POST FALLS ID 83854 3. <u>New</u> Registered Agent Signature.
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4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
<input checked="" type="radio"/> Manager or Member	Name	Street or PO Address	City	State	Country Postal Code
Manager Member (circle one) Neil K. Crouse 3495 W. Ridge dr. Post Falls Id Kootenai 83854					

5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 31977 </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature: <u>Neil K. Crouse</u> </div> <div> Date: <u>3/23/12</u> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Name (type or print): <u>Neil K. Crouse</u> </div> <div> Title: <u>Manager</u> </div> </div>
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a **new** registered agent must sign in Block 3.

Block 4: Circle either **Member** or **Manager**. Enter names and business addresses of managers or members of the limited liability company. **Note:** **Do not** put "same as last year" or "same as above". **These will not be accepted.**

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.