

No. W 173891	Reinstatement Annual Report Form ADMIN DISSOLVED 02/27/2018		2. Registered Agent and Office (NOT A P.O. BOX) GABRIELA A HARAGOS 859 W MOUNTAINASH LOOP NAMPA ID 83686																																			
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. ALL ABOUT BOOKS & PAYROLL LLC GABRIELA A HARAGOS 859 W MOUNTAINASH LOOP NAMPA ID 83686		3. <u>New</u> Registered Agent Signature.																																			
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>Gabriela</td> <td>859 W. Mountain Id</td> <td>USA</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td>Haragos</td> <td>Ash Loop</td> <td>Nampa</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"/>	Gabriela	859 W. Mountain Id	USA				Manager <input type="checkbox"/> Member <input type="checkbox"/>	Haragos	Ash Loop	Nampa				Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Gabriela	859 W. Mountain Id	USA																																			
Manager <input type="checkbox"/> Member <input type="checkbox"/>	Haragos	Ash Loop	Nampa																																			
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of: IDAHO W 173891	6. Signature: <u>Gabriela Haragos</u> Date: <u>2/28/18</u> Name (type or print): <u>Gabriela Haragos</u> Title: <u>Manager</u>																																					

Issued 02/28/2018 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM