

No. W 178913		Reinstatement Annual Report Form ADMIN DISSOLVED 05/31/2018		2. Registered Agent and Office (NOT A P.O. BOX) ANABEL LOPEZ 201 ITHACA ST CALDWELL ID 83605	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83726-0080		1. Mailing Address: Correct in this box if needed. SOLUTIONS FRAMING LLC ANABEL LOPEZ 201 ITHACA ST CALDWELL ID 83605		3. <u>New</u> Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
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 type="checkbox"/> Member <input checked="" type="checkbox"/>		Anabel Lopez	201 Ithaca St.	Caldwell	ID 83605
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:		6.		Date:	
IDAHO		Signature:		6-14-18	
W 178913		Name (type or print):		Title:	
		Anabel Lopez		LLC Member	

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