

No. <b>W 74235</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 08/25/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> ADVANCEDESIGN GROUP LC 1775 W STATE ST #194 BOISE ID 83702																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> ADVANCEDESIGN SERVICES LC 1775 W STATE ST #194 BOISE ID 83702		3. <u>New</u> Registered Agent Signature.																																			
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>																																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 25%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td> <del>Manager</del> <input checked="" type="checkbox"/> <del>Member</del> <input checked="" type="checkbox"/> </td> <td colspan="6"> <i>Advancedesign Group LC, 1775 W State St #194, Boise, ID, Ada, 83702</i> </td> </tr> <tr> <td>           Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> <tr> <td>           Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> <tr> <td>           Manager <input type="checkbox"/> Member <input type="checkbox"/> </td> <td colspan="6"></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	<del>Manager</del> <input checked="" type="checkbox"/> <del>Member</del> <input checked="" type="checkbox"/>	<i>Advancedesign Group LC, 1775 W State St #194, Boise, ID, Ada, 83702</i>						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 74235</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature: <u><i>[Signature]</i></u>            Name (type or print): _____         </td> <td style="width: 40%;">           Date: <u><i>July 21, 2016</i></u>            Title: <u><i>Manager</i></u> </td> </tr> </table>			Signature: <u><i>[Signature]</i></u> Name (type or print): _____	Date: <u><i>July 21, 2016</i></u> Title: <u><i>Manager</i></u>																																	
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Issued 07/21/2016 by JL1																																						

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM