<sub>No.</sub> W 65126	ADMIN DISSOLVED 10/06/2009  P.O. BOX)  MARK JOHNSON	· · · · · · · · · · · · · · · · · · ·	
Return to:		1	
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.	3738 16TH ST LEWISTON ID 83501	
	MARK JOHNSON TRUCKING LLC		
	3738 16TH ST LEWISTON ID 83501	3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00			
4. Limited Liability Compani	es: Enter Names and Addresses of Managers OR Members.		
Office Held Nam	e Street or PO Address	City State Country Postal Code	
owner MAA	Street or PO Address  K Johnson Trukny LLL 3738/6 th 5h	Lavish Id. Nes 83501	
		e no produce describer e many	
is			
5. Organized Under the Lav	rs of: 6. Signature: Malinature:	Date: 44: 42	
IDAHO	Signature: ///all/ball/ballin	oate, property	
W 65126	Name (type or print): MARK Johnson	Title:	
Issued 10/13/2009 by SL1			

## 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 <u>new</u> registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. Note: <u>Do not put "same as last year" or "same as above".</u>
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.