

No. W 51274	Reinstatement Annual Report Form ADMIN DISSOLVED 09/07/2010		2. Registered Agent and Office (NOT A P.O. BOX) CRAIG THOMAS GILES 627 EAST 1500 NORTH SHELLEY ID 83274																	
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. AAA GILES JANITORIAL & CARPET CLEANING LLC CRAIG T. GILES 627 EAST 1500 NORTH SHELLEY ID 83274 USA		3. <u>New</u> Registered Agent Signature.											
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</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><i>OWNER</i> <i>mgr</i></td> <td>CRAIG GILES</td> <td>627 E 1500 N.</td> <td>SHELLEY</td> <td>ID</td> <td>IDAHO</td> <td>83274</td> </tr> </tbody> </table>							Office Held	Name	Street or PO Address	City	State	Country	Postal Code	<i>OWNER</i> <i>mgr</i>	CRAIG GILES	627 E 1500 N.	SHELLEY	ID	IDAHO	83274
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Issued 09/16/2010 by CLH																				