



No. W 120204		Reinstatement Annual Report Form ADMIN DISSOLVED 03/10/2014		2. Registered Agent and Office (NOT A P.O. BOX) CLARENCE B CELLAN RT 2 BOX 858 386 Cutshalts POCATELLO ID 83202	
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. WESTERN RENTALS, LLC CLARENCE B CELLAN RT 2 BOX 858 386 Cutshalts POCATELLO ID 83202		3. <u>New</u> Registered Agent Signature.	
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 checked="" type="checkbox"/> Member <input type="checkbox"/>		Clarence Barry Cellan		386 Cutshalts Pocatello ID 83202	
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:		10-20-17	
W 120204		Name (type or print):		Title:	
		Clarence B Cellan		10-20-17	
Issued 10/20/2017 by online					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM