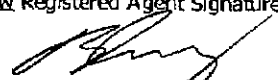


V 127859

<http://www.sos.idaho.gov/CorpPrintForm/display.aspx?enum=w127859>**FILED EFFECTIVE**

No. W 127859 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014 1. Mailing Address: Correct in this box if needed. TRINITY HVAC & REPAIR LLC <i>Name OK</i> 48 E NESTER DR PINE ID 83647 TRINITY HVAC and Repair LLC P.O. BOX 4014 Hailey Id. 83333	2. Registered Agent and Office (NOT A P.O. BOX) TROY PELTZER & ASSOCIATES 16070 IDAHO CENTER BLVD STE 101 NAMPA ID 83687 CARNEY ACCOUNTING INC. 113 E Sullivan, Suite B HAILEY ID 83333 3. New Registered Agent Signature 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</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>Manager ☐ Member ☒</td> <td>Edwin Rojas</td> <td>P.O. BOX 4014</td> <td>Hailey ID</td> <td>Blaine</td> <td></td> <td>83333</td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Randy L. Baker</td> <td>48 E Nester Dr.</td> <td>PINE ID</td> <td>Elmore</td> <td></td> <td>83647</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager ☐ Member ☒	Edwin Rojas	P.O. BOX 4014	Hailey ID	Blaine		83333	Manager ☐ Member ☒	Randy L. Baker	48 E Nester Dr.	PINE ID	Elmore		83647	Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 127859	6. Signature:  Name (type or print): <u>Edwin Rojas</u> Date: <u>04-07-2015</u> Title: <u>Member</u>																																				

Issued 04/07/2015 by online