






No. W 154245		Reinstatement Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		ADMIN DISSOLVED 10/27/2017		LANNAH PAREDES 	
REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. LAMP CONSULTING GROUP, LLC LANNAH PAREDES 745 w bridge st suite f  blackfoot ID 83221		745 w bridge st suite f blackfoot id 83221	
				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"/>		Lannah Paredes 760 janet st blackfoot id 83221			
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: 		12/5/2017	
W 154245		Name (type or print): lannah paredes		Title: owner	
Issued 12/05/2017 by online					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM