


No. <b>W 72020</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/07/2012</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> SENEN AGUILAR CAMPOS 2502 E LINDEN RD CALDWELL ID 83605
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> A CAMPOS MARKET LLC SENEN AGUILAR 2502 E LINDEN RD CALDWELL ID 83605 USA		3. <u>New</u> Registered Agent Signature.
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>			
Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> <b>SENEN AGUILAR 2502 E. LINDEN CALDWELL, ID 83605</b>			
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:  <div style="text-align: center; font-weight: bold; font-size: 1.2em;">             IDAHO              W 72020           </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;">           Signature:             Name (type or print): <b>JEFFREY HALL</b> </div> <div style="width: 35%; text-align: center;">           Date: <b>7/13/12</b>            Title: <b>AGENT</b> </div> </div>	

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1: Entity name may not be altered through the use of this form.** Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the