FILED EFFECTIVE

2. Registered Agent and Office (NOT A No. W 53403 Reinstatement Annual Report Form P.O. BOX) ADMIN DISSOLVED 11/05/2009 ROWE SANDERSON IV Return to: 717 VILLAGE LANE SECRETARY OF STATE 1. Mailing Address: Correct in this box if needed. **BOISE ID 83702** 450 N 4th STREET 1770 W. State St. # 1918 PO BOX 83720 SANDERSON STONE AND TIMBER, LLC BOISE, ID 83720-0080 **ROWE SANDERSON IV** 570 S COLLEGE AVE 3. New Registered Agent Signature. OAKLEY ID 85346 1770 W. State St. #198 Boise, ID 83702 REINSTATEMENT FEE DUE: \$30.00 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. Office Held Street or PO Address City Rowe Sanderson II 1770 W. State St. #198 Boise, ID 83702, ADA COYAL Organized Under the Laws of: 6. Date: ሰ Signature: 💋 **IDAHO** W 53403 Name (type or print): Issued 03/17/2010 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. Note: <u>Do not</u> put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.