

No. W 93733		Reinstatement Annual Report Form ADMIN DISSOLVED 08/14/2017		2. Registered Agent and Office (NOT A P.O. BOX) ALL DAY \$49 IDAHO REGISTERED A 784 S CLEARWATER LOOP STE F POST FALLS ID 83854 USA	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. CITYWORLD INVESTIGATIONS LLC BOB SAUNDERS 1011 N 11TH ST COEUR D ALENE ID 83814		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager or Member <input checked="" type="checkbox"/> Manager <input type="checkbox"/> Member		Name <input type="text"/> Street or PO Address <input type="text"/> City <input type="text"/> State <input type="text"/> Country <input type="text"/> Postal Code			
Manager <input type="checkbox"/> Member <input type="checkbox"/>		Bob SAUNDERS, 974 CACTUS CIRCLE ST. GEORGE, UT 84790			
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: IDAHO W 93733		6. Signature:  Name (type or print): Bob SAUNDERS		Date: <u>5-1-18</u> Title: <u>MANAGER</u>	

Issued 05/01/2018 by SLD

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM