




No. W 70051	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012		2. Registered Agent and Office (NOT A P.O. BOX) RYAN COLSON 220 S FIVE MILE BOISE ID 83709																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. CREEKSTONE AND ASSOCIATES CONSTRUCTION L.L.C. RYAN COLSON 220 S FIVE MILE RD BOISE ID 83709 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Ryan Colson</td> <td>220 S Five Mile Rd</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83709</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></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 <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Ryan Colson	220 S Five Mile Rd	Boise	ID	USA	83709	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Ryan Colson	220 S Five Mile Rd	Boise	ID	USA	83709																																
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;"> IDAHO W 70051 </div>	6. <table style="width: 100%;"> <tr> <td style="width: 70%;"> Signature:  </td> <td style="width: 30%;"> Date: <u>5/15/2013</u> </td> </tr> <tr> <td> Name (type or print): <u>Ryan Colson</u> </td> <td> Title: <u>MEMBER</u> </td> </tr> </table>			Signature: 	Date: <u>5/15/2013</u>	Name (type or print): <u>Ryan Colson</u>	Title: <u>MEMBER</u>																															
Signature: 	Date: <u>5/15/2013</u>																																					
Name (type or print): <u>Ryan Colson</u>	Title: <u>MEMBER</u>																																					
Issued 05/09/2013 by PEH																																						