





STATE OF IDAHO

Office of the secretary of state, Lawerence Denney REINSTATEMENT ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$30.00 - Make Checks Payable to Secretary of State

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File #: 0003819115

Date Filed: 3/24/2020 5:03:58 PM

| Re | Reinstatement Annual Report Form | | | | | | |
|--|--|----------------|---|--|--|--|--|
| | select one: Standard, Expedited or Same Day Ser escriptions below) | vice (see | Sta | ndard (filing fee \$30) | | | |
| | Current Entity Name | | Joh | nson LLC | | | |
| | he file number of this entity on the records of the left state is: | daho Secretary | 000 | 3306510 | | | |
| | Organized under the laws of: | | IDA | НО | | | |
| E | Entity Type: | | Lim | ited Liability Company (D) | | | |
| | ity Subtype: imited Liability Company Subtype | | Lim | ited Liability Company | | | |
| | Limited Liability Company Name: Limited Liability Company name | | Johnson LLC | | | | |
| 1 | registered agent on record is: Registered Agent | | Phys 439 STE EAC | rey G Johnson gistered Agent sical Address E SHORE DR E 100 GLE, ID 83616-6406 ing Address | | | |
| | The new physical (street) address of the agent in Idaho is: Physical Address | | JEFF JOHNSON 2775 W. NAVIGATOR DR. STE 110 | | | | |
| | | | MEI | RIDIAN, ID 83642 | | | |
| The new mailing address of the agent in Idaho is: Mailing Address | | | 2775 W NAVIGATOR DR STE 110 MERIDIAN, ID 83642-7652 | | | | |
| The mailing address of the corporation is: 2775 W NAVIGATOR DR STE 110 | | | | | | | |
| N | MERIDIAN, ID 83642-7652 | | | | | | |
| Limited Liability Company Managers and Members | | | | | | | |
| | Name | Title | | Address | | | |
| | ■ Jeffrey G Johnson | Member | | 2775 W NAVIGATOR DR STE 110 | | | |

MERIDIAN, ID 83642-7652



| The Application for Reinstatement must be signed by at least one governor. | | | | | | |
|--|-----------|------------|--|--|--|--|
| Jeff Johnson | | 03/24/2020 | | | | |
| Sign Here | | Date | | | | |
| | | | | | | |
| Job Title: | President | | | | | |