


No. <b>W 128042</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014</b>		<b>2. Registered Agent and Office (NOT A P.O. BOX)</b>			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	<b>1. Mailing Address: Correct in this box if needed.</b> <del>XXXXXXXXXXXXXXXXXXXX</del> DART WARZ CENTENNIAL, LLC <del>501 E SCENERY LANE STE 100</del> <del>MERIDIAN ID 83642</del>		STANTON WILKERSON <del>XXXXXXXXXXXXXXXXXXXX</del> <del>XXXXXXXXXXXX</del> Corrected: 501 E. Scenery Lane Suite 100 Meridian, ID 83642			
<b>REINSTATEMENT FEE DUE: \$30.00</b>	Corrected: P.O. Box 2359 Eagle, ID 83616		<b>3. <u>New</u> Registered Agent Signature.</b>			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>						
<b>Manager or Member</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City</b>	<b>State</b>	<b>Country</b>	<b>Postal Code</b>
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Stanton Wilkerson	P.O. Box 2359	Eagle	ID	USA	83616
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
<b>5. Organized Under the Laws of:</b>	<b>6.</b>					
IDAHO W 128042	Signature:	Date:				
		6/24/15				
	Name (type or print): Stanton Wilkerson	Title: Manager				
Issued 05/13/2015 by online						

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**