


No. W 32114	Reinstatement Annual Report Form ADMIN DISSOLVED 10/06/2009		2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL W RAMSAY 6119 LELAND DR NAMPA ID 83687			
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. NORTHWEST REALTY SERVICES, LLC MICHAEL W RAMSAY 6119 LELAND DR NAMPA ID 83687		3. <u>New</u> Registered Agent Signature.			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
manager	Michael W Ramsay	6119 Leland Dr.	Nampa	ID	Carajon	83687
5. Organized Under the Laws of: IDAHO W 32114		6. Signature:  Name (type or print): <u>Michael W. Ramsay</u>		Date: <u>25 July 10</u> Title: <u>Manager</u>		
Issued 07/21/2010 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.