

1/17/2017

W 62196

No. W 62196	Reinstatement Annual Report Form ADMIN DISSOLVED 08/31/2016		2. Registered Agent and Office (NOT A P.O. BOX)																																			
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. RJ FRAMING, LLC ROMALDO RUBIO DIAZ 5517 W EDSON ST BOISE ID 83705 <i>371 Le Patricia Ln. Garden City, ID 83714</i>		ROMALDO RUBIO DIAZ 5517 W EDSON ST BOISE ID 83705 3. New Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager ☒ Member ☐</td> <td>Romaldo Rubio Diaz</td> <td>371 Le Patricia Ln</td> <td>Garden City ID</td> <td>W</td> <td></td> <td>83714</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☐	Romaldo Rubio Diaz	371 Le Patricia Ln	Garden City ID	W		83714	Manager ☐ Member ☐							Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 62196		6. Signature: <i>[Signature]</i> Name (type or print): <u>Romaldo Rubio Diaz</u> Date: <u>01/17/2017</u> Title: <u>Owner</u>																																				

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