


12/22/2015

W 71449

No. <b>W 71449</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 05/26/2015</b>		<b>2. Registered Agent and Office (NOT A P.O. BOX)</b> <b>SCOTT J DAWSON</b> <b>1724 W GRANGE AVE</b> <b>POST FALLS ID 83854</b>																																			
<b>Return to:</b> <b>SECRETARY OF STATE</b> <b>450 N 4th STREET</b> <b>PO BOX 83720</b> <b>BOISE, ID 83720-0080</b>	<b>1. Mailing Address: Correct in this box if needed.</b> <b>UPSCALE CONSTRUCTION SERVICES, L.L.C.</b> <b>SCOTT J DAWSON</b> <b>1724 W GRANGE AVE</b> <b>POST FALLS ID 83854 USA</b>																																					
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>24554 N. ESTATES DR</b> <b>ATHOL ID 83801</b>		<b>3. New Registered Agent Signature.</b>																																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <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 <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Scott Dawson</td> <td>24554 N ESTATES DR</td> <td>ATHOL ID</td> <td></td> <td>Idaho</td> <td>83801</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Scott Dawson	24554 N ESTATES DR	ATHOL ID		Idaho	83801	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  <b>IDAHO</b> <b>W 71449</b>	<b>6. Signature:</b>  <b>Name (type or print):</b> <b>Scott Dawson</b>			<b>Date:</b> <b>12-22-15</b> <b>Title:</b> <b>Manager</b>																																		

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**