

No. W 116816	Reinstatement Annual Report Form ADMIN DISSOLVED 12/05/2016		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	1. Mailing Address: Correct in this box if needed. CW CUSTOM CONSTRUCTION LLC CHAD WARD 1248 FAIRVIEW AVE REXBURG ID 83440	Need to Appoint <i>Chad Ward</i> 1248 Fairview Ave. Rexburg, ID 83440	
REINSTATEMENT FEE DUE: \$30.00		3. New Registered Agent Signature <i>Chad Ward</i>	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Name <i>Chad Ward</i>	Street or PO Address <i>1248 Fairview Rexburg ID 83440</i>	City <i>Rexburg</i> State <i>ID</i> Country <i>USA</i> Postal Code <i>83440</i>
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of: IDAHO W 116816	6. Signature: <i>Chad Ward</i> Name (type or print): <i>Chad Ward</i>		
	Date: <i>5-11-17</i> Title: <i>member</i>		

Issued 05/09/2017 by TLB