



0003652219



**STATE OF IDAHO**  
*Office of the secretary of state, Lawrence Denney*  
**REINSTATEMENT ANNUAL REPORT**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$30.00 - Make Checks Payable to Secretary of State

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**-FILED-**

File #: 0003652219

Date Filed: 10/21/2019 3:54:17 PM

| Reinstatement Annual Report Form   |  |                                    |       |         |             |         |                                    |                |        |                                    |
|--|--|------------------------------------|-------|---------|-------------|---------|------------------------------------|----------------|--------|------------------------------------|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)   | Standard (filing fee \$30)   |                                    |       |         |             |         |                                    |                |        |                                    |
| Current Entity Name  | MENDOZA LANDSCAPING LLC  |                                    |       |         |             |         |                                    |                |        |                                    |
| The file number of this entity on the records of the Idaho Secretary of State is:  | 0000509050   |                                    |       |         |             |         |                                    |                |        |                                    |
| Organized under the laws of:   | IDAHO  |                                    |       |         |             |         |                                    |                |        |                                    |
| Entity Type:   | Limited Liability Company (D)  |                                    |       |         |             |         |                                    |                |        |                                    |
| Entity Subtype:  | Limited Liability Company  |                                    |       |         |             |         |                                    |                |        |                                    |
| Entity Name:   | MENDOZA LANDSCAPING LLC  |                                    |       |         |             |         |                                    |                |        |                                    |
| The registered agent on record is:   |  |                                    |       |         |             |         |                                    |                |        |                                    |
| Registered Agent   | JOSE MENDOZA<br>Registered Agent<br>Physical Address<br>742 AUDREY DR<br>HOMEDALE, ID 83628<br>Mailing Address |                                    |       |         |             |         |                                    |                |        |                                    |
| The name and street address of the new registered agent and office in Idaho is:  |  |                                    |       |         |             |         |                                    |                |        |                                    |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.   |  |                                    |       |         |             |         |                                    |                |        |                                    |
| The new physical (street) address of the agent in Idaho is:  |  |                                    |       |         |             |         |                                    |                |        |                                    |
| Physical Address   | 20997 FARGO RD<br>WILDER, ID 83676   |                                    |       |         |             |         |                                    |                |        |                                    |
| The new mailing address of the agent in Idaho is:  |  |                                    |       |         |             |         |                                    |                |        |                                    |
| Mailing Address  | 20997 FARGO RD<br>WILDER, ID 83676-5319  |                                    |       |         |             |         |                                    |                |        |                                    |
| The mailing address of the corporation is:<br>20997 FARGO RD<br>WILDER, ID 83676-5319  |  |                                    |       |         |             |         |                                    |                |        |                                    |
| Limited Liability Company Managers and Members   |  |                                    |       |         |             |         |                                    |                |        |                                    |
| <table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Address</th> </tr> </thead> <tbody> <tr> <td>JOSE OROSCO</td> <td>Manager</td> <td>20997 FARGO RD<br/>WILDER, ID 83676</td> </tr> <tr> <td>MARTINA OROSCO</td> <td>Member</td> <td>20997 FARGO RD<br/>WILDER, ID 83676</td> </tr> </tbody> </table> |  | Name                               | Title | Address | JOSE OROSCO | Manager | 20997 FARGO RD<br>WILDER, ID 83676 | MARTINA OROSCO | Member | 20997 FARGO RD<br>WILDER, ID 83676 |
| Name   | Title  | Address                            |       |         |             |         |                                    |                |        |                                    |
| JOSE OROSCO  | Manager  | 20997 FARGO RD<br>WILDER, ID 83676 |       |         |             |         |                                    |                |        |                                    |
| MARTINA OROSCO   | Member   | 20997 FARGO RD<br>WILDER, ID 83676 |       |         |             |         |                                    |                |        |                                    |
| The Application for Reinstatement must be signed by at least one governor.   |  |                                    |       |         |             |         |                                    |                |        |                                    |
| <i>MARTINA OROSCO</i>  | <u>10/21/2019</u>  |                                    |       |         |             |         |                                    |                |        |                                    |
| Sign Here  | Date   |                                    |       |         |             |         |                                    |                |        |                                    |
| Signer's Title:  | MEMBER   |                                    |       |         |             |         |                                    |                |        |                                    |

B0384-2560 10/21/2019 3:54 PM Received by ID Secretary of State Lawrence Denney