

No. W 65214		Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2011			2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>	
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. BRUMBAUGH CONSTRUCTION LLC CONNIE BRUMBAUGH DAVID BrumBAUGH 104 E FAIRVIEW #258 412 14th AVE S. MERIDIAN ID 83642 Nampa, Idaho 83651			ECONNIE-BRUMBAUGH 641 PUMA PL MERIDIAN ID 83642 DAVID BRUMBAUGH 412 14th AVE S. Nampa, Idaho 83651	
REINSTATEMENT FEE DUE: \$30.00					3. New Registered Agent Signature. <i>David Brumbaugh</i>	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.						
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>		Name	Street or PO Address	City	State	Country
DAVID BRUMBAUGH		412 14th AVE S.	Nampa	Idaho	83651	US
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>						
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>						
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>						
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>						
5. Organized Under the Laws of:  IDAHO W 65214		6.				
		Signature: <u>David Brumbaugh</u>		Date: <u>8-28-2014</u>		
		Name (Type or print): <u>DAVID BRUMBAUGH</u>		Title: <u>OWNER</u>		

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### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailing, the

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