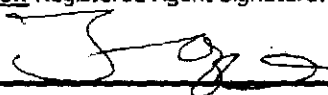



No. W 120889	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015		2. Registered Agent and Office (NOT A P.O. BOX) TYLER MONROE 2743 N DAYSIDE AVE MERIDIAN ID 83646 479 N Lyngate PL Star ID 83669																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. TORCH TRUCKING LLC 479 N LYNNGATE PL STAR ID 83669		3. <u>New Registered Agent Signature.</u> 																																			
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 <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Tyler Monroe</td> <td>479 N Lyngate</td> <td>Star ID</td> <td></td> <td></td> <td>83669</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Randy Nash</td> <td>9990 W Beacon Light</td> <td>Star ID</td> <td></td> <td></td> <td>83669</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"/>	Tyler Monroe	479 N Lyngate	Star ID			83669	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Randy Nash	9990 W Beacon Light	Star ID			83669	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 120889	6. Signature:  Name (type or print): <u>Tyler Monroe</u>			Date: <u>4-28-15</u> Title: <u>President</u>																																		

Issued 04/28/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM