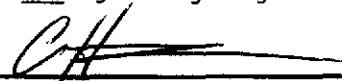
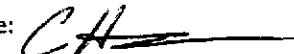


No. W 45518		Reinstatement Annual Report Form ADMIN DISSOLVED 03/04/2010			2. Registered Agent and Office (NOT A P.O. BOX) CASEY HOWELL 963 MEADOW WAY BLACKFOOT ID 83221		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HOWELL CONCRETE L.L.C. CASEY HOWELL 963 MEADOW WAY BLACKFOOT ID 83221			3. New Registered Agent Signature. 		
REINSTATEMENT FEE DUE: \$30.00							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.							
Manager or Member		Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>		Casey Howell 963 Meadow Way Blackfoot Id us			83221		
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 45518		6. Signature: 			Date: <u>5/19/2016</u>		
		Name (type or print): <u>Casey Howell</u>			Title: <u>Manager</u>		

Issued 05/19/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM