

B0027-3573 11/07/2018 10:04 AM Received by ID Secretary of State Lawrence Denney



Idaho Limited Liability Company Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 11/30/2018

Reporting Year: 2018

Return completed form within 30 days to:

Idaho Secretary of State
Attn: Annual Reports
700 West Jefferson, E205
450 North 4th Street
Boise, ID 83702
Phone: (208) 334-2300

Annual Report: No filing fee if received by due date.
If reinstatement is required, the reinstatement fee is \$30.00.

SOS Control Number: 481257
Limited Liability Company (D)

Filing Status: Active-Existing
Date Formed: 11/16/2015

Formation Locale: ID

Name and Mailing Address:
AUTO DA CORSA NA, LLC
4542 E CAMP LOWELL STE 200
TUCSON, AZ 85712

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:
HALBERT D LINDQUIST
1730 LEAR LN
HAILEY, ID 83333

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

(4) Limited Liability Companies: Enter names and addresses of Managers OR Members. Do NOT put 'same as last year' or 'same as above'. These will not be accepted. Changes here will not affect the entity mailing address. If more space is needed, please add an attachment.

Manager/Member	Name	Business Address	City, State, Zip
<input type="checkbox"/> Mgr <input checked="" type="checkbox"/> Mem	Halbert D Lindquist	4542 E Camp Lowell #200	Tucson, AZ 85712
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			
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<input type="checkbox"/> Mgr <input type="checkbox"/> Mem			

(5) Signature: *Halbert D Lindquist*

(6) Date: 10/29/18

(7) Type/Print Name: HALBERT D LINDQUIST

(8) Title: MANAGER

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.