## EXPEDITE

W COCZO	Deinstatement Annual Day 15	2 Paristant I American
No. W 69673	Reinstatement Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX)  LUIS GUERRERO 204 HOLLY ST. 833 Coach man
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	ADMIN DISSOLVED 03/07/2013  1. Mailing Address: Correct in this box if needed.	
	204 HOLLY ST	83402
		-REXBURG-ID-83440
REINSTATEMENT FEE DUE: \$30.00	833 Coachman Drive	3. New Registered Agent Signature.
	Idaho Falls ID 83402	
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<ol> <li>Limited Liability</li> </ol>	Companies: Enter Names and Addresses of Manager	s OR Members. See Instructions.
Manager or Member	Name Street or PO Address City	
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5. Organized Under the Lav	ws of: 6.	
	Signature: ()	Date:
IDAHO	dois Guerre	9/18/13
W 69673	Name (type or print):	Title:
	Luis Guerrero	Manager
ssued 09/18/2013 by JL1		

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM