1,01 11 10 10 1	tatement Annual Report Form	2. Registered Agent and Office
	IIN DISSOLVED 03/21/2017	(NOT A P.O. BOX)
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 DOUG JAY	Address: Correct in this box if needed. URANCE, LLC 'O BUSINESS PARK LN	DOUG JAYO 10564 W BUSINESS PARK LN BOISE ID 83709
REINSTATEMENT FEE due: \$30.00		3. <u>New</u> Registered Agent Signature.
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 ☐ Member X Dougl	as Jayo 10564 W. Business Park Lane, B	oise, Idaho USA 83709
Manager Member		
Manager  Member		
Manager Member Member		
5. Organized Under the Laws of: 6.  Signature:		Date: 12 /76 / 2017
	he (type or print):	Title:
Issued 11/21/2017 by online	ouglas Jayo /	Member

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM