

No. W 72513	Reinstatement Annual Report Form ADMIN DISSOLVED 06/07/2012		2. Registered Agent and Office (NOT A P.O. BOX) LES BOCK 5960 N WILLOWDALE LANE GARDEN CITY ID 83714 USA
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. MAGIC UNITED SOCCER CLUB, L.L.C. C/O LES BOCK 950 W BANNOCK ST SUITE 1100 BOISE ID 83702		3. New 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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Carlos Gonzalez	130 Meadow Dr.	Rexburg ID USA 83340
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: <div style="text-align: center; font-weight: bold;">IDAHO W 72513</div>		6. Signature: <u>Carlos L. Gonzalez H.</u> Name (type or print): <u>Carlos Alejandro Gonzalez H.</u> Date: <u>4/10/14</u> Title: <u>Manager.</u>	
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM