

No. <b>W 70587</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 04/14/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MANUEL SANTOS 665 BEDKE AVE BURLEY ID 83318
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. <b>Mailing Address: Correct in this box if needed.</b> SANTOS METALS & RECYCLING LEASING LLC IRENE SANTOS PO BOX 218 BURLEY ID 83318		3. <u>New</u> Registered Agent Signature.
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
<b>Manager or Member</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City State Country Postal Code</b>
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Irene Santos	P.O. Box <del>7218</del>	Burley ID USA 83318
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Manuel Santos	P.O. Box <del>7218</del>	Burley ID USA 83318
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-size: 1.2em;"> <b>IDAHO</b>  <b>W 70587</b> </div>		6. Signature: <u>Irene Santos</u> Date: <u>1-6-16</u> Name (type or print): <u>IRENE SANTOS</u> Title: <u>Member</u>	
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