ID - 505

3/6/2012 10:35:13 AM PAGE 2/004 Fax Server

<sub>No.</sub> W 35854	Reinstatement Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) Jackson Dovis
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  REINSTATEMENT PER DUE: \$30.00	ADMIN DISSOLVED 04/11/2011  1. Melling Address: Correct in this bex if needed.  ROB DAVIS CONSTRUCTION LLC  1436 PINE CONE RD #1  MOSCOW ID 83843	HOBERT R. DAVIS  1436 PINE CONE RD #1  MOSCOW ID 83843  609 Suth Working fun,  100 July Toloho 83843  3. New Registered Agent Signature.
	enies: Enter Nomes and Addresses of Managers OR M	City State Country
Manager ** omhor (circle one	ob Davis 1436 Pine Cone	Rosd#1 Muscom ID USA 83843
5. Organized Under the Law IDAHO W 35854	Signature:	Dale: 3/6/12.  Dale: 3/6/12.  Title: Agent
Issued 03/06/2012 by CLH		

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the corecil address. Note: To ensure future mailings, the corrected address must be made block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a name registered agent must sign in Block 3.

Block 4: Circle either Member or Members and business addresses of managers or members of the limited liability company. Note: Do not put "some as last your" or "same as above". These will not be accepted.

Block 5: May not be aftered through the use of this form.

Black 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.