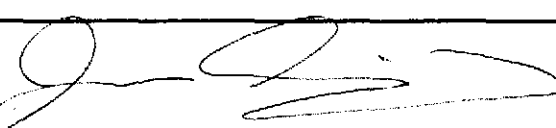


No. W 125471	Reinstatement Annual Report Form ADMIN DISSOLVED 08/14/2017		2. Registered Agent and Office (NOT A P.O. BOX) JOSE LUIS ANGUIANO 1424 W BLOSSOM PL NAMPA ID 83651
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ANGUIANO ENTERPRISES, LLC 1424 W BLOSSOM PL NAMPA ID 83651		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 <input checked="" type="checkbox"/> Member <input type="checkbox"/> <i>Jose L. Anguiano</i> <i>1424 W Blossom PL</i> <i>Nampa</i> <i>ID</i> <i>83651</i>			
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; font-size: large;"> IDAHO W 125471 </div>		6. Signature:  Date: <i>3/16/2018</i> <hr/> Name (type or print): <i>Jose L Anguiano</i> Title: <i>mgr.</i>	
Issued 03/16/2018 by JL1			