


No. W 156927	Reinstatement Annual Report Form ADMIN DISSOLVED 01/22/2018		2. Registered Agent and Office (NOT A P.O. BOX)
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. GRIP SUSPENSION & DESIGN LLC WILLIAM HARRIS 1460 AUTUMN WAY JEROME ID 83338		WILLIAM HARRIS 1460 AUTUMN WAY JEROME ID 83338
REINSTATEMENT FEE DUE: \$30.00			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"/>	William M Harris Jr.	1460 Autumn Way	Jerome 83338
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:	6.		
IDAHO W 156927	Signature: 		Date: 3-9-18
	Name (type or print): William M Harris		Title: owner
Issued 03/09/2018 by TLB			