

No. W 127742	Reinstatement Annual Report Form ADMIN DISSOLVED 10/21/2015	
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.  ROB JUKER LLC ROBIN JUKER 1008 N 11TH ST BOISE ID 83702	2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>  ROBIN JUKER 1008 N 11TH ST <i>718 N 20<sup>th</sup> St</i> BOISE ID 83702
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	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"/>	<i>Robin Juker</i>	<i>718 N 20<sup>th</sup> St</i>	<i>Boise</i>	<i>Id</i>		<i>83702</i>

Manager  Member

Manager  Member

Manager  Member

Manager  Member

5. Organized Under the Laws of:

IDAHO  
W 127742

6.

Signature:

*Robin Juker*

Date:

*12/28/15*

Name (type or print):

*Robin Juker*

Title:

*Owner*

FILED