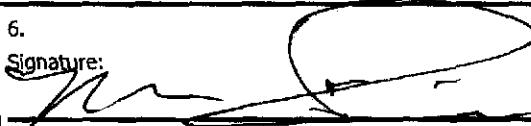


FILED EFFECTIVE

No. W 172446		Reinstatement Annual Report Form ADMIN DISSOLVED 12/28/2017			2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>		
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. CAR89 LLC MARC FABIANI 9923 W SHUMARD ST STAR ID 83669 9165 W. CHINON BLVD <sup>11/18</sup> GARDEN CITY, ID 83714			MARC FABIANI 9923 W SHUMARD ST STAR ID 83669		
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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>		Name <b>MARC FABIANI</b>		Street or PO Address <b>104 C FAIRVIEW AVE</b>		City <b>MERIDIAN</b>	State <b>ID</b> Country <b>83642</b> Postal Code
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: <b>IDAHO</b> <b>W 172446</b>			6. Signature:  Name (type or print): <b>Marc Fabiani</b> Date: <b>9/7/18</b> Title: <b></b>				
Issued 09/07/2018 by online							