

No. W 57788	Due no later than Jan 31, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. ARMSTRONG RESTAURANT REPAIR, LLC MIKE W ARMSTRONG 66 HANFORD DR SAGLE ID 83860		MICHAEL ARMSTRONG 66 HANFORD DR SAGLE ID 83860			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	MICHAEL ARMSTRONG	66 HANFORD DR	SAGLE	ID		83860
MEMBER	LYNETTE ARMSTRONG	66 HANFORD DR	SAGLE	ID		83860
5. Organized Under the Laws of: ID W 57788	6. Annual Report must be signed.* Signature: Lynette Armstrong Name (type or print): Lynette Armstrong		Date: 11/25/2017 Title: Secretary			
Processed 11/25/2017		* Electronically provided signatures are accepted as original signatures.				