

No. W 80908	Due no later than Jan 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ARNS TERRAZAS 238 E AVE C WENDELL ID 83355																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. RIGHT-A-WAY CONSTRUCTION, LLC ARNS F TERRAZAS 238 E AVE C WENDELL ID 83355 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 15%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>ARNIS</td> <td>238 E AVE C</td> <td>WENDELL</td> <td>ID</td> <td></td> <td>83355</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>SAME</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	ARNIS	238 E AVE C	WENDELL	ID		83355	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	SAME						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 80908 </div>	6. Signature: <u><i>Arns F Terrazas</i></u> Date: <u>12-9-2016</u> Name (type or print): <u>ARNIS F TERRAZAS</u> Title: <u>OWNER</u>																																					

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM