

No. <b>W 64231</b>  Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 09/20/2012</b>  1. <b>Mailing Address: Correct in box if needed.</b> MC LANDSCAPING & SPRINKLERS, LLC <del>8630</del> DEWEY RD <b>8640 Dewey Rd</b> EMMETT ID 83617	2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MARCO A SANCHEZ <del>8630</del> DEWEY RD <b>8640 Dewey Rd</b> EMMETT ID 83617  3. <u>New</u> Registered Agent Signature. <b>Marco A Sanchez</b>																																			
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: 30%;">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: 5%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Marco A Sanchez</td> <td>8640 Dewey Rd</td> <td>Emmett, ID</td> <td></td> <td></td> <td>83617</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Maria A Garcia</td> <td>8640 Dewey Rd</td> <td>Emmett, ID</td> <td></td> <td></td> <td>83617</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"/>	Marco A Sanchez	8640 Dewey Rd	Emmett, ID			83617	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Maria A Garcia	8640 Dewey Rd	Emmett, ID			83617	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																															
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Marco A Sanchez	8640 Dewey Rd	Emmett, ID			83617																															
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Maria A Garcia	8640 Dewey Rd	Emmett, ID			83617																															
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																					
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																					
5. Organized Under the Laws of:  <div style="text-align: center;"> <b>IDAHO</b>  <b>W 64231</b> </div>	6. Signature: <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>Marco A Sanchez</b>            Name (type or print):  <b>Marco A Sanchez</b> </div> <div style="width: 35%;">           Date:  <b>5/13/2013</b>            Title:  <b>Member</b> </div> </div>																																				

Issued 03/29/2013 by KAH

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM