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W 89156

	8	sued 04/06/2015 by online
Date: U.U. 18 Date:	Name (type or print)	IDAH0 W 99156
	ws of:   6.	5. Organized Under the Laws of:
		Meneger 🗌 Member 🔲
		Manager Member 🗌
Buse, 20 63709	Sos	Manager ☐ Member ☐
a S. Valley Height D.	Manager Manufer & CTM Assisted Living Inc. 7100 S. Valley Height B.	Manager□Mamber杖 C
ers OR Members. See Instructions.  State Country Postal Code	Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.	l. Limited Liability Manager or Member
		DUE: \$30.00
3. New Registered Agent Signature.		REINSTATEMENT FEE
	JENNIFER BELVILLE 7100 S VALLEY HEIGHTS DR BOISE ID 83709	80ISE, ID 83720-0080
7100 S VALLEY HEIGHTS DR BOISE ID 83709	1. Mailing Address: Correct in this box if needed. SHAMROCK HOUSE, LLC	SECRETARY OF STATE 450 N 4th STREET
LISA MOORE	ADMIN DISSULVED 03/30/2015	Return to:
2. Registered Agent and Office (NOT A P.O. BOX)	Reinstatement Annual Report Form	No. W 99156

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

address must be inside Block 1. mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct

of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box. Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Check either Member or Manager. Enter names and business addresses of managers or members of the limited flability company. Note: <u>PO NOT</u> put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.