


| No. <b>W 159653</b><br><br>Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT FEE</b><br><b>DUE: \$30.00</b>   | <b>Reinstatement Annual Report Form</b><br><b>ADMIN DISSOLVED 03/27/2018</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>MCGARRY FENCING, LLC<br>JAY MCGARRY<br>PO BOX 31<br>HAMER ID 83425 USA |                      | <b>2. Registered Agent and Office</b><br><b>(NOT A P.O. BOX)</b><br>JAY MCGARRY<br>2438E 2073N<br>HAMER ID 83425<br><br><b>3. New Registered Agent Signature,</b> |       |                      |             |       |         |             |   |             |           |       |    |           |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|---|----------------------|---|-------|----------------------|-------------|-------|---------|-------------|---|-------------|-----------|-------|----|-----------|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b><br><table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Jay McGarry</td> <td>PO Box 31</td> <td>Hamer</td> <td>ID</td> <td>Jefferson</td> <td>83425</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> <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 checked="" type="checkbox"/> Member <input type="checkbox"/> | Jay McGarry | PO Box 31 | Hamer | ID | Jefferson | 83425 | Manager <input type="checkbox"/> Member <input type="checkbox"/> |  |  |  |  |  |  | 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 checked="" type="checkbox"/> Member <input type="checkbox"/>  | Jay McGarry   | PO Box 31            | Hamer   | ID    | Jefferson            | 83425       |       |         |             |   |             |           |       |    |           |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>   |   |                      |   |       |                      |             |       |         |             |   |             |           |       |    |           |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>   |   |                      |   |       |                      |             |       |         |             |   |             |           |       |    |           |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Manager <input type="checkbox"/> Member <input type="checkbox"/>   |   |                      |   |       |                      |             |       |         |             |   |             |           |       |    |           |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>5. Organized Under the Laws of:</b><br><br><b>IDAHO</b><br><b>W 159653</b>  | <b>6.</b><br>Signature: <br>Name (type or print): <u>J.P. McGarry</u><br>Date: <u>4/9/2018</u><br>Title: <u>President</u>              |                      |   |       |                      |             |       |         |             |   |             |           |       |    |           |       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |