

No. <b>W 162173</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/05/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> RICARDO GARCIA 260 SMITH AVE NAMPA ID 83651 <u>Heriberto Alatorre - Peña</u> <u>200 E Ithica St.</u> <u>Caldwell, ID 83605</u>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: <b>Correct in this box if needed.</b> H.A. CONSTRUCTION, LLC 200 E ITHICA ST CALDWELL ID 83605		3. <u>New</u> Registered Agent Signature. <u>Heriberto Alatorre</u>																																			
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</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: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Heriberto Alatorre - Peña</td> <td>200 E. Ithica St.</td> <td>Caldwell</td> <td>ID</td> <td></td> <td>83605</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"/>	Heriberto Alatorre - Peña	200 E. Ithica St.	Caldwell	ID		83605	Manager <input type="checkbox"/> Member <input type="checkbox"/>							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; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 162173</b> </div>		6. <table style="width: 100%;"> <tr> <td style="width: 60%;">           Signature:  <u>Heriberto Alatorre</u> </td> <td style="width: 40%;">           Date:  <u>6-16-17</u> </td> </tr> <tr> <td>           Name (type or print):  <u>Heriberto Alatorre - Peña</u> </td> <td>           Title:  <u>member</u> </td> </tr> </table>		Signature: <u>Heriberto Alatorre</u>	Date: <u>6-16-17</u>	Name (type or print): <u>Heriberto Alatorre - Peña</u>	Title: <u>member</u>																															
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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**