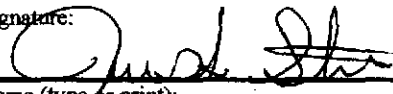
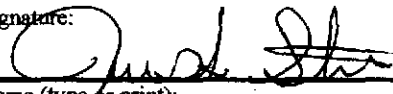
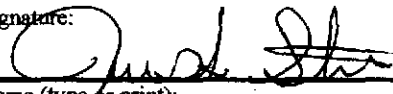


No. <b>W 83299</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 07/21/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>  JUSTIN STIRM 3255 GAWAINE PL BOISE ID 83704
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed.  ALL-PRO REFINISHING LLC JUSTIN STIRM 3255 GAWAINE PL BOISE ID 83704		3. <u>New</u> Registered Agent Signature.

**<sup>4</sup>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.**

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Justin Stirm	3255 Gawaine Pl	Boise	Idaho	US	83704
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 83299</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">           Signature:  </td> <td style="width: 30%;">           Date: <u>3-1-16</u> </td> </tr> <tr> <td>           Name (type or print): <u>Justin Stirm</u> </td> <td>           Title: <u>Owner</u> </td> </tr> </table>	Signature: 	Date: <u>3-1-16</u>	Name (type or print): <u>Justin Stirm</u>	Title: <u>Owner</u>
Signature: 	Date: <u>3-1-16</u>				
Name (type or print): <u>Justin Stirm</u>	Title: <u>Owner</u>				

Issued 03/01/2016 by online

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM