

No. W 116434		Reinstatement Annual Report Form ADMIN DISSOLVED 11/14/2013		2. Registered Agent and Office (NOT A P.O. BOX) BRAD MCJUNKIN 11434 CATSKILL DR 20669 Middleton Rd. CALDWELL ID 83605	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. B & S SOLUTIONS, LLC BRAD MCJUNKIN 11434 CATSKILL DR 20669 Middleton Rd. CALDWELL ID 83605		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>		Name	Street or PO Address	City	State Country Postal Code
Manager <input type="checkbox"/> Member <input type="checkbox"/>		Brad McJunkin 20669 Middleton Rd Caldwell ID Canyon 83605			
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of: IDAHO W 116434		6. Signature: 		Date: <u>4-13-15</u>	
		Name (type or print): <u>Brad McJunkin</u>		Title: <u>Owner</u>	
Issued 04/13/2015 by JL1					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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