No. W 87070	Reinstatement Annual Report Form ADMIN DISSOLVED 12/07/2010	2. Registered Agent and Office (NOT A P.O. BOX) LILIAN HICEL BELTRAN ~~135 ROY WAY~~ 31557 Hwy 200 ~~SAGLE ID 83860~~ Ponderay ID 83852
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. NORTH IDAHO RENTALS AND STORAGE, LLC PO BOX 135 SAGLE ID 83860	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.

Manager/Member Name	Street or PO Address	City	State	Country	Postal Code
Lilian Hicel Beltran	P.O. Box 135	Sagle	ID	USA	83860

5. Organized Under the Laws of:	6.
IDAHO W 87070	Signature: Lilian Beltran Date: 12-21-2010 Name (type or print): Lilian Hicel Beltran Title: Manager

Issued 12/21/2010 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct 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.