


No. W 96020 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 11/03/2011 1. Mailing Address: Correct in this box if needed. AMERIBRICK LLC MIGUEL GADDI 1486 S LOGGERS POND PL #23 1715 SENDERO LN BOISE ID 83706 83712	2. Registered Agent and Office (NOT A P.O. BOX) MIGUEL GADDI 1486 S LOGGERS POND PL #23 BOISE ID 83706 12 1715 SENDERO LN 3. <u>New</u> Registered Agent Signature.																												
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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 colspan="7">Manager Member (circle one)</td> </tr> <tr> <td></td> <td>MIGUEL GADDI</td> <td colspan="5">SAME AS ABOVE</td> </tr> <tr> <td></td> <td>ADRIAN GADDI</td> <td colspan="5">SAME AS ABOVE</td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager Member (circle one)								MIGUEL GADDI	SAME AS ABOVE						ADRIAN GADDI	SAME AS ABOVE				
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5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 96020 </div>	6. <div style="display: flex; justify-content: space-between;"> <div> Signature:  <hr/> Name (type or print): MIGUEL GADDI <hr/> </div> <div> Date: 03/19/12 <hr/> Title: MANAGER <hr/> </div> </div>																													
Issued 03/19/2012 by DK1																														