

W 43536

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No. W 43536	Reinstatement Annual Report Form ADMIN DISSOLVED 01/16/2015		2. Registered Agent and Office (NOT A P.O. BOX) COREY URE <del>1574 S LAKEWAY</del> <del>EAGLE ID 83616</del> 2343 E Skokie Ct Eagle, ID 83616																																				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. BIG FISH CARPENTRY LLC COREY URE <del>1574 S LAKEWAY DR</del> 2343 E Skokie Ct EAGLE ID 83616 USA		3. New 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>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Corey Ure</td> <td>2343 E Skokie Ct</td> <td>Eagle</td> <td>Idaho</td> <td>Ar</td> <td>83616</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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Corey Ure	2343 E Skokie Ct	Eagle	Idaho	Ar	83616	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:  IDAHO W 43536		6. Signature: <u>Corey Ure</u> Date: <u>8-19-16</u> Name (type or print): <u>Corey Ure</u> Title: <u>Owner/Member</u>																																					

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM