

No. **W 123883**

Reinstatement Annual Report Form  
**ADMIN DISSOLVED 07/21/2015**

2. Registered Agent and Office  
**(NOT A P.O. BOX)**

HASAN ABDULKAVEEM  
1000 S LEADVILLE AVE #2  
BOISE ID 83706

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.**

ADAM'S AUTO SALE LLC  
HASAN ABDULKAVEEM  
1000 S LEADVILLE AVE #2  
BOISE ID 83706

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 or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Hasan Abdulkaveem	2720 W Mainst	Boise	ID	ADA	83702
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:

**IDAHO**  
**W 123883**

6.

Signature:

Date:

8/10/15

Name (type or print):

Hasan Abdulkaveem

Title:

OWNER