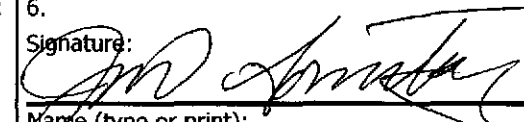
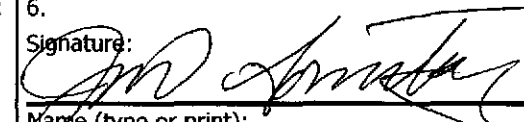
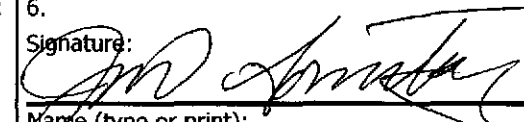


No. <b>W 139450</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 10/04/2016</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> JOHN SONNTAG 3749 WARM SPRINGS CIRCLE BOX 246 NEW MEADOWS ID 83654-0246
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> AJS LANDSCAPE CONSTRUCTION & MAINTENANCE, LLC AJS LANDSCAPE PO BOX 246 NEW MEADOWS ID 83654-0246		3. <u>New</u> Registered Agent Signature.

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 checked="" type="checkbox"/>	John SONNTAG	P.O. Box 246	New Meadows,	Id		83654
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:  <div style="text-align: center; font-size: 1.2em;"> <b>IDAHO</b>  <b>W 139450</b> </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:   </td> <td style="width: 40%;">           Date:            10/13/2016         </td> </tr> <tr> <td>           Name (type or print):            JOHN SONNTAG         </td> <td>           Title:            Manager/Member         </td> </tr> </table>	Signature: 	Date: 10/13/2016	Name (type or print): JOHN SONNTAG	Title: Manager/Member
Signature: 	Date: 10/13/2016				
Name (type or print): JOHN SONNTAG	Title: Manager/Member				

Issued 10/13/2016 by online