





No. W 113720	Reinstatement Annual Report Form ADMIN DISSOLVED 08/15/2014		2. Registered Agent and Office (NOT A P.O. BOX) JEFF MINERT 450 S MAIN ST STE 85 MERIDIAN ID 83642																																			
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. CDL COMPLIANCE TESTING, LLC JEFF MINERT 520 S MERIDIAN RD #130 MERIDIAN ID 83642	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>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Jeff Minert</td> <td>642 E Fallsbranch</td> <td>Meridian ID</td> <td>USA</td> <td></td> <td>83642</td> </tr> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>David Minert</td> <td>520 S Meridian Rd</td> <td>Meridian ID</td> <td>USA</td> <td></td> <td>83642</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"/>	Jeff Minert	642 E Fallsbranch	Meridian ID	USA		83642	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	David Minert	520 S Meridian Rd	Meridian ID	USA		83642	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 113720		6. <table border="1"> <tr> <td>Signature:</td> <td>Date:</td> </tr> <tr> <td></td> <td>8/25/14</td> </tr> <tr> <td>Name (type or print):</td> <td>Title:</td> </tr> <tr> <td>Jeff Minert</td> <td>President</td> </tr> </table>		Signature:	Date:		8/25/14	Name (type or print):	Title:	Jeff Minert	President																											
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