

No. W 101915	Reinstatement Annual Report Form ADMIN DISSOLVED 06/28/2017		2. Registered Agent and Office (NOT A P.O. BOX) CHAD RENNER 934 SHEPHERD RD ST MARIES ID 83861
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. RENNER TRUCKING, LLC CHAD K RENNER 934 SHEPHERD RD ST MARIES ID 83861		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 type="checkbox"/>	CHAD K. RENNER	934 SHEPHERD RD	ST. MARIES	ID	USA	83861
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	RUBINA R. RENNER	934 SHEPHERD RD	ST. MARIES	ID	USA	83861
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;"> IDAHO W 101915 </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature: <u>Chad K. Renner</u> Name (type or print): <u>CHAD K. RENNER</u> </div> <div style="width: 35%;"> Date: <u>7/3/17</u> Title: <u>OWNER</u> </div> </div>
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