


No. W 132182	Reinstatement Annual Report Form ADMIN DISSOLVED 03/30/2015		2. Registered Agent and Office (NOT A P.O. BOX) MIGUEL ANGEL OCAMPO 5209 W TARGEE ST TRLR 10 BOISE ID 83705																																			
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. TACOS Y TORTAS EL PACO, LLC MIGUEL ANGEL OCAMPO 5209 W TARGEE ST TRLR 10 BOISE ID 83705		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>Miguel A Ocampo</td> <td>5209 W Targee St Trlr 10</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83705</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Rosal Salgado</td> <td>5209 W Targee St Trlr 10</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83705</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"/>	Miguel A Ocampo	5209 W Targee St Trlr 10	Boise	ID	USA	83705	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Rosal Salgado	5209 W Targee St Trlr 10	Boise	ID	USA	83705	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Miguel A Ocampo	5209 W Targee St Trlr 10	Boise	ID	USA	83705																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Rosal Salgado	5209 W Targee St Trlr 10	Boise	ID	USA	83705																																
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of: IDAHO W 132182	6. Signature:  Name (type or print): Rosal Salgado		Date: 1-11-16 Title: Member																																			
Issued 01/11/2016 by online																																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM