


No. W 175384	Reinstatement Annual Report Form ADMIN DISSOLVED 03/27/2018		2. Registered Agent and Office (NOT A P.O. BOX) JOHN WILLIAM STILLWELL 4145 W LIBBY 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. ARC RESTORATION LLC JOHN WILLIAM STILLWELL 4145 W LIBBY BOISE ID 83705		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"/>	Robert Porter 4705 Boise Id ada 83705		
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	John William Stillwell 4145 W LIBBY Boise Id ada 83705		
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-weight: bold; font-size: large;"> IDAHO W 175384 </div>		6. Signature:  <hr/> Name (type or print): <u>Robert Porter</u> <div style="float: right; text-align: right;"> Date: <u>5-2-2018</u> Title: <u>owner</u> </div>	