


No. W 104259	Reinstatement Annual Report Form ADMIN DISSOLVED 09/10/2013		2. Registered Agent and Office (NOT A P.O. BOX) COREY ROGERS 241 W 300 N RUPERT ID 83350
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. ROGGE AUCTIONS, LLC KADE A ROGGE 248 WEST 300 NORTH RUPERT ID 83350 USA		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 type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Kade Rogge 680 N 100E Rupert ID, 83350</i>			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Ron Rogge 892 E 100S Declo ID, 83323</i>			
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 104259 </div>		6. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> Signature:  Name (type or print): <u>Kade Rogge</u> </div> <div style="width: 35%; text-align: right;"> Date: <u>9/24/13</u> Title: <u>Member</u> </div> </div>	

Issued 09/18/2013 by JL1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM