

No. W 6606	Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) STEVE MOORE 3521 GREENBRIER DR 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. GISMO, LLC STEVE MOORE 3521 GREENBRIER DR BOISE ID 83705		3. <u>New</u> Registered Agent Signature.	

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.					
Manager/Member	Name	Street or PO Address	City	State	Country Postal Code
	Steve Moore	3521 Greenbrier Dr.	Boise	ID	USA 83705

5. Organized Under the Laws of: <div style="text-align: center; padding: 10px;"> IDAHO W 6606 </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;"> Signature: <u>Steve Moore</u> </div> <div style="width: 35%;"> Date: <u>12/28/10</u> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Name (type or print): <u>Steve Moore</u> </div> <div style="width: 35%;"> Title: <u>Manager</u> </div> </div>
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.
Note: To ensure future mailings, the corrected address **must** be inside Block 1.