




No. W 14324	Reinstatement Annual Report Form ADMIN DISSOLVED 05/14/2014		2. Registered Agent and Office (NOT A P.O. BOX) EDWARD M SELLERS 3740 GLENBROOK HAILEY ID 83333																																			
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. EDVENTURE SERVICES UNLIMITED, LLC EDWARD M SELLERS PO BOX 1831 HAILEY ID 83333 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%; text-align: left;">Manager or Member</th> <th style="width: 20%; text-align: left;">Name</th> <th style="width: 25%; text-align: left;">Street or PO Address</th> <th style="width: 10%; text-align: left;">City</th> <th style="width: 10%; text-align: left;">State</th> <th style="width: 10%; text-align: left;">Country</th> <th style="width: 10%; text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Edward M Sellers</td> <td>Box 1831</td> <td>Hailey</td> <td>ID</td> <td>USA</td> <td>83333</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> <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"/>	Edward M Sellers	Box 1831	Hailey	ID	USA	83333	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 14324 </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"> Signature:  </td> <td style="width: 30%;"> Date: <u>6/27/2014</u> </td> </tr> <tr> <td> Name (type or print): <u>Edward Sellers</u> </td> <td> Title: <u>member</u> </td> </tr> </table>		Signature: 	Date: <u>6/27/2014</u>	Name (type or print): <u>Edward Sellers</u>	Title: <u>member</u>																															
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM