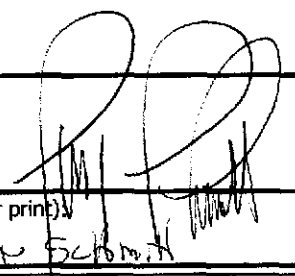


No. W 134684 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 05/31/2018	2. Registered Agent and Office (NOT A P.O. BOX) VIRGINIA ROBINSON 1910 NORTHWEST BLVD COEUR D ALENE ID 83814																																			
	1. Mailing Address: Correct in this box if needed. HALSYON ENTERPRISES LLC RICHARD J SCHMITT 28440 N PANHANDLE RD ATHOL ID 83801 USA	3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>RICHARD J. SCHMITT</td> <td>1712 E. SHERMAN AVE.</td> <td>COA</td> <td>ID</td> <td>USA</td> <td>83814</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>YUONWIE SCHMITT</td> <td>1712 E. SHERMAN AVE.</td> <td>COA</td> <td>ID</td> <td>USA</td> <td>83814</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"/>	RICHARD J. SCHMITT	1712 E. SHERMAN AVE.	COA	ID	USA	83814	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	YUONWIE SCHMITT	1712 E. SHERMAN AVE.	COA	ID	USA	83814	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-weight: bold;"> IDAHO W 134684 </div>	6. Signature:  <hr/> Name (type or print): J. JASON SCHMITT																																				
Date: 6/18/16 Title:																																					
Issued 06/13/2018 by online																																					