W 52220

SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080   1. Mailing Address: Correct in this box if needed. WIXOM ENTERPRISES, LLC JUSTIN D WIXOM PO BOX 3468   1139 NEWGATE DR- AMMON 1D 83405 JUSTIN D WIXOM PO BOX 3468   28/9 Dot oTH Y ST IDAHO FALLS ID 83403 USA     REINSTATEMENT FEE DUE: \$30.00   II DAHO FALLS ID 83403 USA IDAHO FALLS ID 83403 USA   II DAHO FALLS, T.D.   3. New Registered Agent Signature.     4.   Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.   3. New 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 28/9 Docothy State Country Postal Code Facus     Manager Immetrial   Name   Street or PO Address 28/9 Docothy State Country Postal Code Facus     Manager Immetrial   Name (type or print): Name (type or print):   Date: Sep r. 34, 3015	No. W 52220	Reinstatement Annual Report Form   2. Registered Agent and Office     ADMIN DISSOLVED 09/07/2010   1	
Manager or Member   Name   Street or PO Address   City   State   Country   Postal Code     Manager   Member   JUSTIN   JUSTIN   JUSTIN   JUSTIN   Street or PO Address   City   State   Country   Postal Code     Manager   Member   JUSTIN   JUSTIN   JUSTIN   Street or PO Address   City   State   Country   Postal Code     Manager   Member   JUSTIN   JUSTIN   JUSTIN   Street   Str	SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE	a: ARY OF STATE th STREET (83720 ID 83720-0080 TATEMENT FEE (33720 ID 83720-0080 ID 83720-0080 ID 83406 ID 83406 ID 83406 JUSTIN D WIXOM ID 83406 JUSTIN D WIXOM PO-BOX 3468 ID 83403-USA ID AHO FALLS ID 83403-USA	
IDAHO W 52220Signature Signature Name (type or print):Date: Sepr. 34, 3015Title:	Manager or Member Name Street or PO Address City State Country Postal Code   Manager Member 3819 Dorothy Sr IDAHO ID USA 83402   Manager Member ID IDAHO ID USA 83402   Manager Member ID IDAHO ID USA 83402   Manager Member ID IDAHO ID USA 83402		
Issued 09/24/2015 by online	IDAHO W 52220	Signature Date: Sepr. 24, 2015 Name (type or print): JUSTIN WIXOM RESIDENT	

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM