


No. W 129911	Reinstatement Annual Report Form ADMIN DISSOLVED 01/24/2017		2. Registered Agent and Office (NOT A P.O. BOX) TREVOR ERIKSON 352 ROSEWOOD DR 1345 S. 2nd E. REXBURG ID 83440
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. NOSKIRE VENTURES LLC TREVOR ERIKSON PO BOX 832 1154 STOCKS AVE. REXBURG ID 83440		FILED
REINSTATEMENT FEE DUE: \$30.00	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"/>	Trevor Erikson	1345 S. 2nd E.	REXBURG	ID		83440
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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;"> IDAHO W 129911 </div>	6. Signature:  <hr/> Name (type or print): <u>Trevor Erikson</u> <hr/> <div style="display: flex; justify-content: space-between;"> <div> Date: <u>6/2/17</u> <hr/> Title: <u>member</u> <hr/> </div> </div>
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