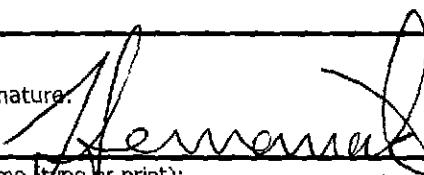


No. W 110086		Reinstatement Annual Report Form ADMIN DISSOLVED 04/26/2016		2. Registered Agent and Office (NOT A P.O. BOX) THOMAS SEMANCIK 7201 KINGSTON DR BOISE ID 83704		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SEMANCIK ENTERPRISES LLC 7201 KINGSTON DR BOISE ID 83704				
REINSTATEMENT FEE DU^E: \$30.00				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	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Thomas Semancik 7201 kingston dr. Boise id USA 83704					
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: IDAHO W 110086		6. Signature:  Name (type or print): Thomas Semancik				
		Date: 5-4-16 Title: Manager				

Issued 05/04/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM