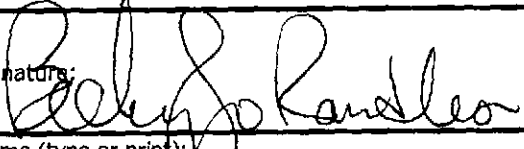


No. W 123235	Reinstatement Annual Report Form ADMIN DISSOLVED 06/12/2015		2. Registered Agent and Office (NOT A P.O. BOX) BECKY JO RANGLES 6744 W EDEN CT RATHDRUM ID 83858																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00				1. Mailing Address: Correct in this box if needed. SELDNAR LLC BECKY JO RANGLES 6744 W EDEN CT RATHDRUM ID 83858																																		
3. <u>New</u> Registered Agent Signature.																																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Becky Jo Randles</td> <td>6744 W Eden Ct</td> <td>Rathdrum</td> <td>ID</td> <td>USA</td> <td>83858</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Debra J</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"/>	Becky Jo Randles	6744 W Eden Ct	Rathdrum	ID	USA	83858	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Debra J						Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Becky Jo Randles	6744 W Eden Ct	Rathdrum	ID	USA	83858																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Debra J																																					
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of: IDAHO W 123235		6. Signature:  Name (type or print): <u>Becky Jo Randles</u> Date: <u>11/17/15</u> Title: <u>member</u>																																				

Issued 11/16/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM