

No. W 138671	Reinstatement Annual Report Form ADMIN DISSOLVED 09/22/2015		2. Registered Agent and Office (NOT A P.O. BOX) JACOB FREHLING 111 WANDERERS WAY KETCHUM ID 83340 Jacob Frehling 402 4th Ave South Hailey, ID 83333
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. DD FRANK CO LLC PO BOX 608 HAILEY ID 83333 D.D. Frank Co LLC 402 4th Ave South Hailey, ID 83333		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"/>	Jacob Frehling	402 4th Ave South	Hailey	ID	USA	83333
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 138671 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: Name (type or print): Jacob Frehling </td> <td style="width: 40%;"> Date: 1-9-2017 Title: Manager </td> </tr> </table>	Signature: Name (type or print): Jacob Frehling	Date: 1-9-2017 Title: Manager
Signature: Name (type or print): Jacob Frehling	Date: 1-9-2017 Title: Manager		

Issued 01/11/2017 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM