

No. W 116517	Reinstatement Annual Report Form ADMIN DISSOLVED 11/17/2015		2. Registered Agent and Office (NOT A P.O. BOX)
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. SREE LLC <i>1765 S Lake Crest Way Eagle, ID 83616</i>
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 checked="" type="checkbox"/> Member <input type="checkbox"/>	<i>Kyle Sales</i>		
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 116517	6. Signature: <i>[Signature]</i> Date: <i>6/27/16</i> Name (type or print): <i>Kyle Sales</i> Title: <i>Managing Member</i>		

Issued 06/24/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM