

No. W 54492		Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2015			2. Registered Agent and Office (NOT A P.O. BOX) STEPHEN M AYERS 1424 SHERMAN AVE #100 COEUR D'ALENE ID 83814		
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. 15007-15009 FREEMAN LLC THOMAS C HEISE PO BOX 1475 HAYDEN ID 83835			3. <u>New</u> Registered Agent Signature.		
REINSTATEMENT FEE DUE: \$30.00							
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>THOMAS C. HEISE PO BOX 1475 HAYDEN ID 83835</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:			6.				
IDAHO W 54492			Signature: <i>Thomas C. Heise</i> Name (type or print): <i>THOMAS C. HEISE</i>				
			Date: <u>1-20-16</u> Title: <u>MANAGER</u>				

Issued 01/18/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM