




No. <b>W 136004</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/28/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> COREY JEPPESEN 8359 AUDUBON DRIVE HAYDEN ID 83835
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> SEEJEPP LLC COREY JEPPESEN 424 E SHERMAN AVE <del>209</del> Ste. 104 COEUR D ALENE ID 83814		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 type="checkbox"/> Member <input checked="" type="checkbox"/>	Corey Jepsen	424 E Sherman Ave	COA	ID	USA	83814
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; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 136004</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature:  </td> <td style="width: 40%;">           Date: <u>8/4/17</u> </td> </tr> <tr> <td>           Name (type or print): <u>Corey Jepsen</u> </td> <td>           Title: <u>Owner</u> </td> </tr> </table>	Signature: 	Date: <u>8/4/17</u>	Name (type or print): <u>Corey Jepsen</u>	Title: <u>Owner</u>
Signature: 	Date: <u>8/4/17</u>				
Name (type or print): <u>Corey Jepsen</u>	Title: <u>Owner</u>				

Issued 07/31/2017 by TLB