

No. C 163902	Reinstatement Annual Report Form ADMIN DISSOLVED 03/21/2017		2. Registered Agent and Office (NOT A P.O. BOX) BEN HENKELS Jamie Duman 8245 N CORNERSTONE DR HAYDEN ID 83835														
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. HENKELS HOLDINGS LTD. BEN HENKELS PO BOX 3350 8245 N Cornerstone Dr. HAYDEN ID 83835																
			3. New Registered Agent Signature. Jamie Duman														
Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</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>President</td> <td>Ben Henkels</td> <td>PO Box 3350</td> <td>Hayden</td> <td>ID</td> <td></td> <td>83835</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Ben Henkels	PO Box 3350	Hayden	ID		83835
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	Ben Henkels	PO Box 3350	Hayden	ID		83835											
5. Organized Under the Laws of: IDAHO C 163902	6. Signature: Jamie Duman Name (type or print): Jamie Duman		Date: 4-26-17 Title: Accountant														

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM