


No. <b>W 36830</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 05/07/2007</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> DAVID GOINS 5631 E BAYTRAIL BOISE ID 83716
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> DEG ENTERPRISES LLC DAVID GOINS 5631 E BAYTRAIL BOISE ID 83716		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"/> David Goins      5631 E. Baytrail      Boise      ID      US.      83716			
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Linda Goins      "      "      "      "      "      "			
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; font-size: large;">             IDAHO W 36830           </div>		6. Signature:  <hr/> Name (type or print): <u>David Goins</u> <div style="float: right; text-align: right;">         Date: <u>4-27-12</u>          Title: <u>Member</u> </div>	

Issued 04/24/2012 by KAH

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM