


No. W 159818	Reinstatement Annual Report Form ADMIN DISSOLVED 03/21/2017		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. SELKOW'S FLOORING LLC 1409 LAKE LOWELL AVE NAMPA ID 83686 P.O. Box 624 Weiser, ID. 83672		RONALD CHARLES SELKOW 2ND 1409 LAKE LOWELL AVE NAMPA ID 83686 56 W Park St Weiser, ID. 83672																																			
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. <table border="1"> <thead> <tr> <th>Manager or Member</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>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Ronald C. Selkow II</td> <td>56 W Park St</td> <td>Weiser</td> <td>ID</td> <td>USA</td> <td>83672</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Ronald C. Selkow II	56 W Park St	Weiser	ID	USA	83672	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 159818	6. Signature:  Date: <u>09/21/17</u> Name (type or print): <u>Ronald C. Selkow II</u> Title: <u>Manager</u>																																					
Issued 09/21/2017 by online																																						

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM