


No. C 149931	Reinstatement Annual Report Form ADMIN DISSOLVED 10/11/2013		2. Registered Agent and Office (NOT A P.O. BOX) CHRISTOPHER HANSEN 374 E CARTER ST BOISE ID 83706														
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. THINCORE, INC. CHRISTOPHER L HANSEN 10108 W OVERLAND RD PO Box 5181 BOISE ID 83706 USA Boise ID 83705		3. New Registered Agent Signature.														
4. 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>Christopher Hansen</td> <td>PO Box 5181</td> <td>Boise</td> <td>ID</td> <td>USA</td> <td>83705</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Christopher Hansen	PO Box 5181	Boise	ID	USA	83705
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	Christopher Hansen	PO Box 5181	Boise	ID	USA	83705											
5. Organized Under the Laws of: IDAHO C 149931	6. Signature:  <hr/> Name (type or print): Christopher L Hansen			Date: 4-10-14 <hr/> Title: President													
Issued 04/09/2014 by online																	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM