


No. <b>W 105595</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 11/17/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>  RYAN SIGMAN 2396 W. KING RD KUNA ID 83634
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>  SIGMAN ENTERPRISES LLC RYAN K. SIGMAN 2396 W. KING RD KUNA ID 83634		3. <u>New</u> Registered Agent Signature.
4. <b>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b>			
Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code			
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Ryan K. Sigman</i> <i>2396 W. King Rd.</i> <i>Kuna, ID</i> <i>83634</i>			
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/> <i>Clint B. Sigman</i> <i>2396 W. King Rd.</i> <i>Kuna, ID</i> <i>83634</i>			
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 105595           </div>	6. Signature:  <hr/> Name (type or print): <i>Ryan K. Sigman</i> <div style="float: right; text-align: right;">           Date: <i>April 4, 2017</i>            Title: <i>Owner/Partner</i> </div>		
Issued 04/04/2017 by JLI			

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM