

FILED EFFECTIVE

No. W 3372 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 04/08/2009 1. Mailing Address: Correct in this box if needed. S.T.K., LLC SCOTT H KNOPP 366 E 150 S 489 E. 300 S. BURLEY ID 83318	2. Registered Agent and Office (NOT A P.O. BOX) SCOTT H KNOPP 489 E 300 S BURLEY ID 83318 3. <u>New</u> Registered Agent Signature.																					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <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>VP/Sec</td> <td>Scott H. Knopp</td> <td>366 E 150 S</td> <td>Burley</td> <td>ID</td> <td>US</td> <td>83318</td> </tr> <tr> <td>Pres</td> <td>Todd L. Knopp</td> <td>479 E. 300 S.</td> <td>Burley</td> <td>ID</td> <td>US</td> <td>83318</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	VP/Sec	Scott H. Knopp	366 E 150 S	Burley	ID	US	83318	Pres	Todd L. Knopp	479 E. 300 S.	Burley	ID	US	83318
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5. Organized Under the Laws of: IDAHO W 3372	6. Signature: <u>Scott H Knopp</u> Date: <u>9/1/10</u> Name (type or print): <u>Scott H. Knopp</u> Title: <u>V.P.</u> <u>Mgr</u>																						

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Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.