

ISSUED: 07-04-1995

No. 385	Idaho Limited Liability Company Annual Report Form	2. Registered Agent and Office NOT A P.O. BOX
Return To	Due No Later Than November 30, 1995	KEITH A WEEKS 323 11TH AVE N
Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE * NO FEE REQUIRED	1. Mailing Address -- Please Correct If Not Correct KEBOB LIMITED LIABILITY COMPANY KEITH A WEEKS 6595 W SARON DR 323 11th Ave Nth	BOISE ID 83657 Nampa
	BOISE ID 83703 Nampa Id. 83687	3. Organized Under The Laws of ID NO: 385

4. Names and Addresses of ☐ Managers or ☒ Members (check one)

MUST BE PRINTED OR TYPED

Name	Street or P.O. Address	City	State	Zip
Keith A. Weeks	6144 Nth Brook pl.	BOI	Id.	83714
Robert A. Weeks	6144 Nth Brook pl.	BOI	Id.	83714

5. Signature of the Current Registered Agent
(if changed in block 2)

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Date

Name (Typed or Printed)

 Nikete A. Weeks
 MANAGER

7/31/95