

No. <b>W 29763</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 07/21/2015</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> KEN CHANDLER JR 109 S SAILOR PL 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> KEN CHANDLER RACING, LLC 109 S SAILOR PL KUNA ID 83634		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Ken Chandler 109 S Sailer Place Kuna Id Ada					
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 29763</div>	6. Signature: <u>Ken Chandler</u> Name (type or print): <u>Ken Chandler</u>	Date: <u>1-13-16</u> Title: <u>Manager</u>
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