| No. W 176388 | | Due no later than Jan 31, 2018 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------------|---|--|-----------------------|---|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. KINZER PROPERTIES, LLC BRETT KINZER 3139 5TH STREET | | 3139 5TH S | BRETT C KINZER 3139 5TH STREET LEWISTON ID 83501-8350 | | | |
| | | | | | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | LEWISTON ID 83501 USA | | 3. <u>New</u> Registe | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Compa | nies: Enter N | ames and Address | ses of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | MELISSA KINZER | | 3139 5TH STREET | LEWISTON | ID | USA | 83501 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Brett Kinzer | | | Date: 12/04/2017 | | | |
| W 176388 | | Name (type | or print): Brett Kinzer | | Title: Owner | | | |
| Processed 12/04/2017 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |