

No. <b>W 170558</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 11/30/2017</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> LOWELL KENNETH NAIL SR. 368 IRONHORSE DRIVE EASTPORT ID 83826
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> LKN PROPERTIES LLC LOWELL KENNETH NAIL SR. <del>PO BOX 26</del> <b>289 Comeback Bay Ln.</b> <del>EASTPORT ID 83826</del> <b>Sagle, ID</b> <div style="text-align: right; font-size: 1.2em;">83860</div>		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"/>	LOWELL K. NAIL SR.	289 Comeback Bay Ln.	SAGLE	ID	USA	83860
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-size: 1.2em;">             IDAHO              W 170558           </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">           Signature: <i>Lowell K. Nail Sr.</i> </td> <td style="width: 40%;">           Date: <i>12/20/17</i> </td> </tr> <tr> <td>           Name (type or print): <i>LOWELL K. NAIL SR.</i> </td> <td>           Title: <i>MANAGER</i> </td> </tr> </table>	Signature: <i>Lowell K. Nail Sr.</i>	Date: <i>12/20/17</i>	Name (type or print): <i>LOWELL K. NAIL SR.</i>	Title: <i>MANAGER</i>
Signature: <i>Lowell K. Nail Sr.</i>	Date: <i>12/20/17</i>				
Name (type or print): <i>LOWELL K. NAIL SR.</i>	Title: <i>MANAGER</i>				

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## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1: Entity name may not be altered through the use of this form.** Pay special attention to the mailing address. If the correct mailing 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.