


| No. <b>W 166276</b>   | <b>Reinstatement Annual Report Form</b><br><b>ADMIN DISSOLVED 09/11/2018</b>   |            | 2. Registered Agent and Office<br>(NOT A P.O. BOX)<br>WILLIAM R KINYON<br>618 E 3500 N<br>CASTLEFORD ID 83321 |         |             |         |             |                |             |            |    |     |       |               |             |            |    |     |       |  |
|---|--|------------|---|---------|-------------|---------|-------------|----------------|-------------|------------|----|-----|-------|---------------|-------------|------------|----|-----|-------|--|
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br>REINSTATEMENT FEE<br>DUE: <b>\$30.00</b>  | 1. Mailing Address: Correct in this box if needed.<br>KING & HARTS, LLC<br>WILLIAM R KINYON<br>618 E 3500 N<br>CASTLEFORD ID 83321   |            |   |         |             |         |             |                |             |            |    |     |       |               |             |            |    |     |       |  |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.   |  |            | 3. New Registered Agent Signature.  |         |             |         |             |                |             |            |    |     |       |               |             |            |    |     |       |  |
| Manager or Member<br>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/><br>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/><br>Manager <input type="checkbox"/> Member <input type="checkbox"/><br>Manager <input type="checkbox"/> Member <input type="checkbox"/> | <table border="1"> <thead> <tr> <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>WILLIAM Kinyon</td> <td>248 Main St</td> <td>CASTLEFORD</td> <td>ID</td> <td>USA</td> <td>83321</td> </tr> <tr> <td>Shauna Kinyon</td> <td>248 Main St</td> <td>CASTLEFORD</td> <td>ID</td> <td>USA</td> <td>83321</td> </tr> </tbody> </table> | Name       | Street or PO Address  | City    | State       | Country | Postal Code | WILLIAM Kinyon | 248 Main St | CASTLEFORD | ID | USA | 83321 | Shauna Kinyon | 248 Main St | CASTLEFORD | ID | USA | 83321 |  |
| Name  | Street or PO Address   | City       | State   | Country | Postal Code |         |             |                |             |            |    |     |       |               |             |            |    |     |       |  |
| WILLIAM Kinyon  | 248 Main St  | CASTLEFORD | ID  | USA     | 83321       |         |             |                |             |            |    |     |       |               |             |            |    |     |       |  |
| Shauna Kinyon   | 248 Main St  | CASTLEFORD | ID  | USA     | 83321       |         |             |                |             |            |    |     |       |               |             |            |    |     |       |  |
| 5. Organized Under the Laws of:<br><br>IDAHO<br>W 166276  | 6. <div style="display: flex; justify-content: space-between;"> <div> Signature:<br/> <br/> Name (type or print):<br/> <u>Shauna R. Kinyon</u> </div> <div> Date:<br/> <u>9/17/18</u><br/> Title:<br/> <u>MANAGER/owner</u> </div> </div>  |            |   |         |             |         |             |                |             |            |    |     |       |               |             |            |    |     |       |  |