

REINSTATEMENT FILED EFFECTIVE

No. W 16848 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report Form ADMIN DISSOLVED 01/06/2005 1. Mailing Address - Correct in this box, if applicable KB SPECIALTIES, LLC PO BOX 185 PORTHILL, ID 83853	2. Registered Agent and Office NOT A P.O. BOX LONNIE V KEATE 6980 CODY BONNERS FERRY, ID 83805 3. <u>New</u> registered agent signature																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td>member</td> <td>Lonnie Keate</td> <td>P.O. BOX 185</td> <td>Porthill</td> <td>ID.</td> <td>83853</td> </tr> <tr> <td>member</td> <td>Debra Keate</td> <td>P.O. BOX 185</td> <td>Porthill</td> <td>ID</td> <td>83853</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	member	Lonnie Keate	P.O. BOX 185	Porthill	ID.	83853	member	Debra Keate	P.O. BOX 185	Porthill	ID	83853
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5. Organized under the laws of: IDAHO W 16848	6. Signature <u>Lonnie Keate</u> Date <u>3/20/08</u> Name (Typed or Printed) <u>Lonnie Keate</u> Title <u>member</u>																			

Issued 3/18/2008 by LJM

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1:** 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.
- Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**
- Block 3:** Only a new registered agent must sign in Block 3.
- Block 4:** Enter names and business addresses of president, secretary, and directors (for corporations only), management (for LLCs only), or at least two (2) partners (for LPs and LLPs only. **Note:** Putting "same as last year" or "same as above" will not be accepted.
- Block 5:** May not be altered through the use of this form.
- Block 6:** The annual report must be signed by a person authorized to represent the corporation/LLC/LP/LLP. Print or type the name and title of the signer below the signature.