

No. <b>W 118748</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 02/14/2014</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b>																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed. KINZER 3 LLC 14782 HILLSIDE RD GENESEE ID 83832		<del>KIETH A KINZER</del> Beverly Kinzer 14782 HILLSIDE RD GENESEE ID 83832  3. <u>New</u> Registered Agent Signature.  Beverly Kinzer																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <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>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Beverly Kinzer</td> <td>14782 Hillside Rd</td> <td>Genee</td> <td>IO</td> <td>USA</td> <td>83832</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Kieth Kinzer</td> <td>14782 Hillside Rd</td> <td>Genee</td> <td>IO</td> <td>USA</td> <td>83832</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Paige Kinzer</td> <td>286 E. Dubaut Rd</td> <td>Sagle</td> <td>IO</td> <td>USA</td> <td>83860</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Beverly Kinzer	14782 Hillside Rd	Genee	IO	USA	83832	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Kieth Kinzer	14782 Hillside Rd	Genee	IO	USA	83832	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Paige Kinzer	286 E. Dubaut Rd	Sagle	IO	USA	83860	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <b>IDAHO W 118748</b>	6. Signature: <u>Beverly Kinzer</u> Date: <u>2.8.18</u> Name (type or print): <u>Beverly Kinzer</u> Title: <u>Agent/member</u>																																					

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**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**