


No. W 150200 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 07/28/2016 1. Mailing Address: Correct in this box if needed. RAD 3K LLC STEPHEN CLARK 5089 REMEMBER DR AMMON ID 83406	2. Registered Agent and Office (NOT A P.O. BOX) STEPHEN CLARK 5089 REMEMBER DR AMMON ID 83406 3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%; text-align: left;">Manager or Member</th> <th style="width: 15%; text-align: left;">Name</th> <th style="width: 20%; text-align: left;">Street or PO Address</th> <th style="width: 10%; text-align: left;">City</th> <th style="width: 10%; text-align: left;">State</th> <th style="width: 10%; text-align: left;">Country</th> <th style="width: 10%; text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Stephen Clark</td> <td>5089 Remember</td> <td>Ammon</td> <td>ID</td> <td>Bonneville</td> <td>83406</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> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Stephen Clark	5089 Remember	Ammon	ID	Bonneville	83406	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;">IDAHO</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">W 150200</div>	6. Signature:  <hr/> Name (type or print): <div style="text-align: center; font-family: cursive;">Stephen Clark</div>																																				
<div style="display: flex; justify-content: space-between;"> <div> Date: <hr/> <div style="text-align: center;">8-18-16</div> </div> <div> Title: <hr/> <div style="text-align: center;">8-18-16</div> </div> </div>																																					
Issued 08/18/2016 by online																																					