


**FILED EFFECTIVE**

No. <b>W 159927</b>	<b>Reinstatement Annual Report Form ADMIN DISSOLVED 03/21/2017</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	1. Mailing Address: Correct in this box if needed. MB&K INTERESTS LLC <del>2818 HONEYSUCKLE</del> <del>IDAHO FALLS ID 83402</del> 246 S. Carivista Dr. Idaho Falls, ID 83402	MATTHEW WILDING <del>2818 HONEYSUCKLE</del> <del>IDAHO FALLS ID 83402</del> 246 S. Carivista Dr. Idaho Falls, ID 83402
<b>REINSTATEMENT FEE DUE: \$30.00</b>		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.		
<b>Manager or Member      Name      Street or PO Address      City      State      Country      Postal Code</b>		
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Natie Wilding	246 S. Carivista Dr Idaho Falls, ID USA 83402
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Matthew Wilding	246 S. Carivista Dr. Idaho Falls, ID USA 83402
Manager <input type="checkbox"/> Member <input type="checkbox"/>		
Manager <input type="checkbox"/> Member <input type="checkbox"/>		
5. Organized Under the Laws of:  <b>IDAHO W 159927</b>	6. Signature:  Name (type or print): <u>Matthew Wilding</u> Date: <u>04-05-2017</u> Title: <u>Manager</u>	
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