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| No. W 110152 | | Reinstatement Annual Report Form ADMIN DISSOLVED 04/15/2013 | | 2. Registered Agent and Office (NOT A P.O. BOX) MICHAEL J KRAYNICK 113 E BULLION ST HAILEY ID 83333 | |
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00 | | 1. Mailing Address: Correct in this box if needed. KLL, LLC KEVIN LINCOLN 16 W CROY ST PO BOX 1084 HAILEY ID 83333 | | 3. <u>New</u> Registered Agent Signature. | |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. Manager or Member Name Street or PO Address City State Country Postal Code Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/> Kevin Lincoln PO Box 1084 Hailey ID 83333 Manager <input type="checkbox"/> Member <input type="checkbox"/> Manager <input type="checkbox"/> Member <input type="checkbox"/> Manager <input type="checkbox"/> Member <input type="checkbox"/> | | | | | |
| 5. Organized Under the Laws of: IDAHO W 110152 | | 6. Signature:  Name (type or print): <u>X Kevin Lincoln</u> Date: <u>5-7-13</u> Title: <u>X MEMBER</u> | | | |

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INSTRUCTIONS FOR REINSTATEMENT