

11/16/2017

W 152198

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W 152198 Reinstatement Annual Report Form ADMIN DISSOLVED 08/14/2017		W 152198 Reinstatement Annual Report Form ADMIN DISSOLVED 08/14/2017		7. Registered Agent and Office (NOT A P.O. BOX) KAY LYNN SMITH 605 HAZEL ST ARCO ID 83213	
Return to: SECRETARY OF STATE 450 N 4TH STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. KAY RUSS ENTERPRISES L.L.C. PO BOX 276 ARCO ID 83213		2. Registered Agent and Office (NOT A P.O. BOX) KAY LYNN SMITH 605 HAZEL ST ARCO ID 83213	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.		3. New Registered Agent Signature.		3. New Registered Agent Signature.	
Manager or Member Name Street or PO Address City State Country Postal Code		5. Organized Under the Laws of: IDAHO W 152198		6. Signature: Kay Lynn Smith Name (type or print): Kay Lynn Smith	
Manager ☒ Member ☐ Manager ☐ Member ☒ Manager ☐ Member ☐ Manager ☐ Member ☐		7. Registered Agent and Office (NOT A P.O. BOX) KAY LYNN SMITH 605 HAZEL ST ARCO ID 83213		8. Date: 11/16/17 Title: Manager	
Issued 11/16/2017 by online		Issued 11/16/2017 by online		Issued 11/16/2017 by online	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name and 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