

<p>No. W 3390</p> <p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p>REINSTATEMENT FEE DUE: \$30.00</p>		<p>Reinstatement Annual Report Form ADMIN DISSOLVED 04/15/2013</p> <p>1. Mailing Address: Correct in this box if needed.</p> <p>KL PROPERTIES, L.L.C. DOUGLAS J. KIZER 5605 W FRANKLIN RD BOISE ID 83705</p>	<p>2. Registered Agent and Office (NOT A P.O. BOX)</p> <p>DOUGLAS J. KIZER 5605 W FRANKLIN RD BOISE ID 83705</p> <p>3. New Registered Agent Signature.</p>																																			
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table> <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>Douglas J. Kizer</td> <td>5605 W. Franklin</td> <td>Boise, ID</td> <td>USA</td> <td>83705</td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Judith Leister</td> <td>5605 W.Franklin Rd.</td> <td>Boise, ID</td> <td>USA</td> <td>83705</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> <p>5. Organized Under the Laws of:</p> <p>IDAHO W 3390</p> <p>6.</p> <p>Signature:  Douglas Kizer</p> <p>Name (type or print):</p> <p>Date: 4/18/13 Member Title:</p>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Douglas J. Kizer	5605 W. Franklin	Boise, ID	USA	83705		Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Judith Leister	5605 W.Franklin Rd.	Boise, ID	USA	83705		Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM