



FILED EFFECTIVE

No. W 49030		Reinstatement Annual Report Form ADMIN DISSOLVED 06/23/2016		2. Registered Agent and Office (NOT A P.O. BOX) DAVE WENDELL 409 E 6TH ST SHOSHONE ID 83352 SPARR MCKNIGHT 387 E. HWY 26 SHOSHONE, ID 83352	
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. MCKNIGHT PROPERTIES, LLC SPARR MCKNIGHT PO BOX 607 387 E HWY 26 SHOSHONE ID 83352		3. <u>New</u> Registered Agent Signature. 	
REINSTATEMENT FEE DUE: \$30.00					
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"/>		SPARR MCKNIGHT 387 E. HWY 26 SHOSHONE, ID 83352			
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:		6.			
IDAHO W 49030		Signature: 		Date: 4.21.17	
		Name (type or print): SPARR MCKNIGHT		Title: MEMBER	
Issued 04/21/2017 by online					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM