05/03/2016 12:11 FAX
4/29/2016

W 45359

No. W 45359	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2016	2. Registered Agent and Office (NOT A P.O. BOX) TRACY SHIPMAN NOWOJ ~~1196 STARLING AVE~~ ~~HAYDEN ID 83835~~ 30952 N. Walking Horse Lane Athol, Id 83801
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. GOT KNOTS? LLC TRACY NOWOJ ~~1196 STARLING AVE~~ ~~HAYDEN ID 83835~~ 30952 North Walking Horse Lane Athol Id 83801	3. New Registered Agent Signature. Tracy Nowoj
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 ☒ Member ☒	Tracy Nowoj	1042 Mill St.	Coeur d Alene	ID	U.S.	83814
Manager ☐ Member ☐						
Manager ☐ Member ☐						
Manager ☐ Member ☐						

5. Organized Under the Laws of:	6.
IDAHO W 45359	Signature: Tracy Nowoj Date: 4/30/16 Name (type or print): Tracy Nowoj Title: Owner

Issued 04/29/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM