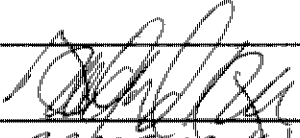


No. C104813	Annual Report Form Due No Later Than November 30, 1999		2. Registered Agent and Office NOT A P.O. BOX BRADFORD TAYLOR KNIPE 671 E. RIVERPARK LN. SUITE 100 BOISE ID 83706
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct KNIPE & KNIPE, INC. BRADFORD TAYLOR KNIPE P.O. BOX 1696		3. Organized Under the Laws of: ID C104813
** FINAL NOTICE **			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)			
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u> <u>State</u> <u>Zip</u>
<i>NO CHANGES</i>			
<i>PRESIDENT BRADFORD T. KNIPE P.O. BOX 1696 BOISE ID 83701</i>			
<i>VICE-PRES. WILLIAM D. KNIPE, III P.O. BOX 1696 BOISE ID 83701</i>			
5. <u>New</u> Registered Agent Signature		6. Signature  Date <u>10/14/99</u> Name (Typed or Printed) <u>BRADFORD KNIPE</u> Title <u>PRES</u>	

ISSUED: 10-01-1999

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