No. W 174316	Reinstatement Annual Report Form ADMIN DISSOLVED 02/27/2018	2. Registered Agent and Office (NOT A P.O. BOX)
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. LEWISII LLC KEN KOPE 1390 E PROHASKA EAGLE ID 83616	KEN KOPE 1390 E PROHASKA EAGLE ID 83616
reinstatement fee due: \$30.00		3. <u>New</u> Registered Agent Signature.
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 W KEN KONF 1390 E.PB HASKA EAGUE 10 USA 83616 Manager Member W PILES 677 1289 N. BASIL FEAGUE NO USA 83616 Manager Member Member Member Member Manager Member Member		
5. Organized Under the Law IDAHO W 174316 Issued 03/02/2018 by onlin	Signature: Name (type or print): KEN KOPE	Date: 3-2-18 Title: MEMBEL