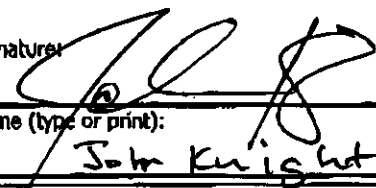


No. C 190346	Reinstatement Annual Report Form ADMIN DISSOLVED 06/07/2012		2. Registered Agent and Office (NOT A P.O. BOX)														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. KNIGHT GROUP INC 1107 N BOULDER CT 1007 N Boulder POST FALLS ID 83854 Court		JOHNATHAN A KNIGHT 1107 N BOULDER CT POST FALLS ID 83854 1007 N Boulder Ct. Post Falls, ID 83854														
REINSTATEMENT FEE DUE: \$30.00			3. <u>Now</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"><thead><tr><th>Office Held</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>Pres/Dir</td><td>Johnathan Knight</td><td>1007 N Boulder Ct</td><td>Post Falls</td><td>ID</td><td>USA</td><td>83854</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres/Dir	Johnathan Knight	1007 N Boulder Ct	Post Falls	ID	USA	83854
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
Pres/Dir	Johnathan Knight	1007 N Boulder Ct	Post Falls	ID	USA	83854											
5. Organized Under the Laws of: IDAHO C 190346	6. Signature:  Name (type or print): John Knight			Date: 9-13-13 Title: President													

Issued 09/10/2013 by DK1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM