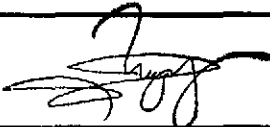


No. <b>W 55626</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 01/16/2014</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> DALE F NAGY 4977 N HOLLOW LANE BOISE ID 83702																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	<b>1. Mailing Address: Correct in this box if needed.</b> D&K 100 EAST CORPORATE DRIVE LLC DALE F NAGY 4977 N HOLLOW LANE BOISE ID 83702																																					
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <table border="1"> <thead> <tr> <th>Manager or Member</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>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>DALE F. NAGY</td> <td>4977 N. Hollow Ln</td> <td>Boise</td> <td>ID</td> <td>Ada</td> <td>83702</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DALE F. NAGY	4977 N. Hollow Ln	Boise	ID	Ada	83702	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							<b>3. <u>New</u> Registered Agent Signature.</b>
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<b>5. Organized Under the Laws of:</b>  <b>IDAHO</b> <b>W 55626</b>	<b>6.</b> Signature:  <hr/> Name (type or print): <u>DALE F. NAGY</u> <hr/> Date: <u>3/30/15</u> <hr/> Title: <u>Member</u>																																					

Issued 03/30/2015 by online

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**