


No. W 145345	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2016		2. Registered Agent and Office (NOT A P.O. BOX) RYAN W SMITH 1968 S 2450 E MALTA ID 83342			
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. BLACK PINE KENNELS LLC PO BOX 124 MALTA ID 83342		3. New Registered Agent Signature.			
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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Ryan W Smith	PO Box 124	Malta	ID	U.S.A.	83342
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Miranda Ruiz	PO Box 124	Malta	ID	U.S.A.	83342
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
5. Organized Under the Laws of: IDAHO W 145345		6. Signature: 				
		Date: <u>3/29/16</u> Name (type or print): <u>Ryan Smith</u>		Title: <u>President</u>		

Issued 03/29/2016 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM