

12/22/2014

W 124482

No. W 124482		Reinstatement Annual Report Form ADMIN DISSOLVED 07/15/2014		2. Registered Agent and Office (NOT A P.O. BOX) KIRK BAILEY 1614 SATTERFIELD DR POCATELLO ID 83201	
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. ANKIRSERVICES, LLC KIRK BAILEY 1614 SATTERFIELD DR POCATELLO ID 83201			
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 <input checked="" type="checkbox"/> Member <input type="checkbox"/>		ANN BAILEY		1614 SATTERFIELD DR, POCATELLO, ID, BANNOCK, 83201	
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>		KIRK BAILEY		1614 SATTERFIELD DR, POCATELLO, ID, BANNOCK, 83201	
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
Manager <input type="checkbox"/> Member <input type="checkbox"/>					
5. Organized Under the Laws of:		6.			
IDAHO W 124482		Signature: <u>Ann Bailey</u>		Date: <u>12-22-14</u>	
		Name (type or print): <u>ANN BAILEY</u>		Title: <u>MANAGER</u>	
Issued 12/22/2014 by online					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM