<u>and state out to the state</u>	INSTRUCTIONS ON REVERSE SIDE	ISSUED: 07-04-19	75
No. 349	Idaho Limited Liability Company Annual Report Form	2. Registered Agent and Office NO	
Return To Secretary of State 700 W Jefferson P.O. Box 83720 Boise, ID 83720-0080 * FIRST NOTICE *	Due No Leter Than November 30, 1995 1 Mailing Address - Please Correct If Not Correct	KATHIE JONES 3999 KINSMEN LN	
	KINSMEN CO., L.L.C. KATHIE JONES 3999 KINSMEN LN	IDAHO FALLS ID	83404
		3. Organized Under The Laws of	
NO FEE REQUIRED	IDAHO FALLS ID 83404	NO: 349	
4. Names and Addresses of M	anagers or Members (check one)	MUST BE PRINTED OR TYPE	D
Rheim B. Jones, IT	Street or P.O. Address 3999 Kinsman Cane Id	City State who Folls Idoho	<u>Zio</u> 83404
5. Signature of the Guardine Registers (if change	knowledge the correct and complete. Signature	een examined by me and is to the	best of my
	Name (hipset or Printed)		

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