

No. W 66351 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 12/04/2012 1. Mailing Address: Correct in this box if needed. J&K LIVESTOCK TRANSPORTATION LLC 603 NORTH RD JEROME ID 83338 152 Syringa Plains Loop Shoshone Id 83352	2. Registered Agent and Office (NOT A P.O. BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA 3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Jonathan D Molt</td> <td>152 Syringa Plains Loop</td> <td>Shoshone</td> <td>Id</td> <td></td> <td>83352</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Katherine N Molt</td> <td>152 Syringa Plains Loop</td> <td>Shoshone</td> <td>Id</td> <td></td> <td>83352</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 checked="" type="checkbox"/> Member <input type="checkbox"/>	Jonathan D Molt	152 Syringa Plains Loop	Shoshone	Id		83352	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Katherine N Molt	152 Syringa Plains Loop	Shoshone	Id		83352	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 66351	6. Signature: <u>Katherine N Molt</u> Date: <u>5-14-13</u> Name (type or print): <u>Katherine N Molt</u> Title: <u>Bookkeeper</u>																																				

Issued 05/14/2013 by LLC

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Member