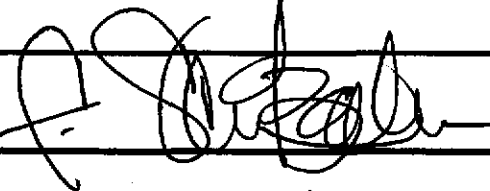
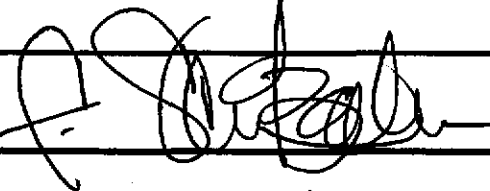
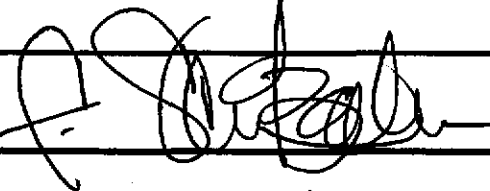


No. W 19529	Reinstatement Annual Report Form ADMIN DISSOLVED 09/07/2011		2. Registered Agent and Office (NOT A P.O. BOX) F SCOTT BEECHAM 1301 W HILL ROAD BOISE ID 83702														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. FSB LLC SCOTT BEECHAM 1301 W HILL ROAD BOISE ID 83702		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><input checked="" type="radio"/> Manager <input type="radio"/> Member (circle one)</td><td>F. SCOTT BEECHAM</td><td>1301 W. HILL RD.</td><td>BOISE</td><td>ID.</td><td>USA</td><td>83702</td></tr></tbody></table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	<input checked="" type="radio"/> Manager <input type="radio"/> Member (circle one)	F. SCOTT BEECHAM	1301 W. HILL RD.	BOISE	ID.	USA
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code											
<input checked="" type="radio"/> Manager <input type="radio"/> Member (circle one)	F. SCOTT BEECHAM	1301 W. HILL RD.	BOISE	ID.	USA	83702											
5. Organized Under the Laws of: IDAHO W 19529	6. <table border="1"><tr><td>Signature: </td><td>Date: 12/27/11</td></tr><tr><td>Name (type or print): F. SCOTT BEECHAM</td><td>Title: MGR.</td></tr></table>					Signature: 	Date: 12/27/11	Name (type or print): F. SCOTT BEECHAM	Title: MGR.								
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