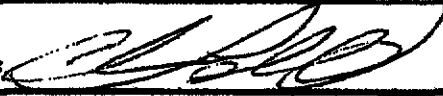
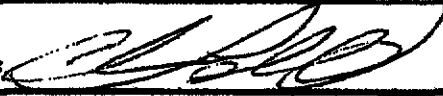
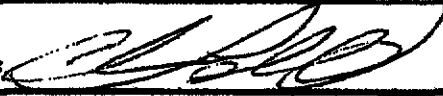


FILED EFFECTIVE

No. W 53946 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 11/06/2008 1. Mailing Address: Correct in this box if needed. STRICTLY EPOXY LLC CHRIS LATTIMER 12346 W CARIBEE INLET DR STAR ID 83669	2. Registered Agent and Office (NOT A P.O. BOX) CHRIS LATTIMER 12346 W CARIBEE INLET DR STAR ID 83669 3. New Registered Agent Signature.														
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office Held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td></td> <td>Chris Lattimer</td> <td>12346 W CARIBEE Inlet Dr</td> <td>Star</td> <td>ID</td> <td>USA</td> <td>83669</td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code		Chris Lattimer	12346 W CARIBEE Inlet Dr	Star	ID	USA	83669
Office Held	Name	Street or PO Address	City	State	Country	Postal Code										
	Chris Lattimer	12346 W CARIBEE Inlet Dr	Star	ID	USA	83669										
5. Organized Under the Laws of: IDAHO W 53946	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: 5.15.2009 </td> </tr> <tr> <td> Name (type or print): Chris Lattimer </td> <td> Title: OWNER </td> </tr> </table>		Signature: 	Date: 5.15.2009	Name (type or print): Chris Lattimer	Title: OWNER										
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Issued 05/15/2009 by KAH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.