




REINSTATEMENT

FILED EFFECTIVE

No. W 45670	Annual Report Form ADMIN DISSOLVED 03/07/2008		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable		DARREN D ENRICO 68 COBBLECREST RD DRIGGS, ID 83422													
TIMBERLINE HOME CREATIONS, LLC 68 COBBLECREST RD DRIGGS, ID 83422		3. New registered agent signature														
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="0" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">Office held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or P.O. Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Zip</th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Darren Enrico</td> <td>68 Cobblecrest</td> <td>Driggs</td> <td>Id</td> <td>83422</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Owner	Darren Enrico	68 Cobblecrest	Driggs	Id	83422
Office held	Name	Street or P.O. Address	City	State	Zip											
Owner	Darren Enrico	68 Cobblecrest	Driggs	Id	83422											
5. Organized under the laws of: IDAHO W 45670		6. <table border="0" style="width: 100%;"> <tr> <td style="width: 40%;">Signature </td> <td style="width: 20%;">Date <u>4/10/08</u></td> </tr> <tr> <td>Name (Typed or Printed) <u>Darren D Enrico</u></td> <td>Title <u>owner member</u></td> </tr> </table>			Signature 	Date <u>4/10/08</u>	Name (Typed or Printed) <u>Darren D Enrico</u>	Title <u>owner member</u>								
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Issued 3/27/2008 by LJM