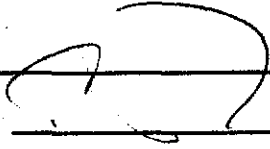


REINSTATEMENT

No. W 57972	Annual Report Form ADMIN DISSOLVED 04/09/2008		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 MONEY SOLUTIONS LLC 417 WILLOW LN SANDPOINT, ID 83864		CHRISTIN PUCCI 417 WILLOW LN SANDPOINT, ID 83864													
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="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>Owner Christin Pucci</td> <td>417 Willow Ln</td> <td>Sandpoint</td> <td>ID</td> <td>83864</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip		Owner Christin Pucci	417 Willow Ln	Sandpoint	ID	83864	3. New registered agent signature	
Office held	Name	Street or P.O. Address	City	State	Zip											
	Owner Christin Pucci	417 Willow Ln	Sandpoint	ID	83864											
5. Organized under the laws of: IDAHO W 57972		6. Signature  Date <u>1-8-09</u> Name (Typed or Printed) <u>Christin Pucci</u> Title <u>Owner</u>														

Issued 1/5/2009 by SLD