FILED EFFECTIVE

REINSTATEMENT

No. C 167189	Annual Report Form ADMIN DISSOLVED 09/05/2007	2. Registered Agent and Office NOT A P.O. BOX RERRY C LEEFLER
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	456 E GHARPAROSA DR
	LEFFLER INCORPORATION 456 E CHAPPAROSA DR 5125 ROYDYN Nampa, Idano KUNA, ID 83634 83636	
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. Office held Name Street or P.O. Address City Prisider State Zip Nump System System System System Nump System System		
	\mathcal{A}_{i}	
5. Organized under the laws of:	6. Signature	Date 9-27-07
IDAHO C 167189	Name (Typed or Shirtley J. Lefter	10 Title 9-27-97
Issued 09/14/2007 by KAI		