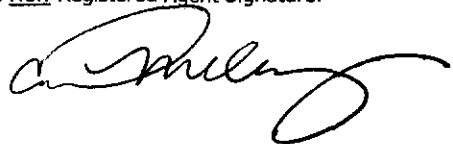


No. W 41849	Reinstatement Annual Report Form ADMIN DISSOLVED 11/08/2007		2. Registered Agent and Office (NOT A P.O. BOX) <i>Celeste</i> ERICK MELENDEZ <i>6403 Arlington Dr</i> 10098 W SHELTERWOOD CT BOISE ID 83709																													
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. E.K.M. LLC PO BOX 6516 <i>6403 Arlington Dr</i> BOISE ID 83707-6516 <i>BOISE ID 83709</i>		3. New Registered Agent Signature. 																													
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 30%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td colspan="7" style="padding-left: 5px;">Manager Member (circle one)</td> </tr> <tr> <td style="text-align: center;">manager</td> <td>Celeste melendez</td> <td>6403 Arlington Dr</td> <td>Boise</td> <td>ID</td> <td></td> <td>83709</td> </tr> <tr> <td style="text-align: center;">manager</td> <td>Erick melendez</td> <td>6403 Arlington Dr</td> <td>Boise</td> <td>ID</td> <td></td> <td>83709</td> </tr> </tbody> </table>	Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager Member (circle one)							manager	Celeste melendez	6403 Arlington Dr	Boise	ID		83709	manager	Erick melendez	6403 Arlington Dr	Boise	ID		83709				
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