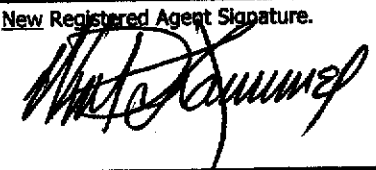
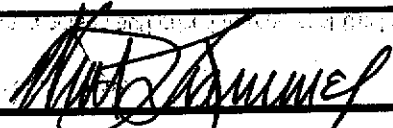


No. W 37113 Return to: SECRETARY OF STATE 50 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 05/05/2010 1. Mailing Address: Correct in this box if needed. ABRAHAM & TRAMMEL L.L.C. WILLIAM TRAMMEL 7325 W RIVERSIDE DR GARDEN CITY ID 83714 8324 Westchester Ave. Boise, Id. 83704	2. Registered Agent and Office (NOT A P.O. BOX) WILLIAM TRAMMEL 7325 W RIVERSIDE DR GARDEN CITY ID 83714 8324 Westchester Ave. Boise, Idaho 83704 3. New Registered Agent Signature. 				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
GM	William Trammel	8324 Westchester	Boise	ID	Ada	83704
5. Organized Under the Laws of: IDAHO W 37113			6.			
			Signature:			Date: 6/16/2010
			Name (type or print):	William D. Trammel		Title: GM
Issued 05/21/2010 by SLD						

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.