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|-----------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------------------------------------------------------------|---------------------|
| No. <b>C 163867</b>                                                                                                                           |                | <b>Reinstatement Annual Report Form</b><br><b>ADMIN DISSOLVED 03/08/2011</b>                                                      |        | 2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> )<br>SARAH ANDERSON<br>38 WINGER CIRCLE<br>VICTOR ID 83455 |                     |
| Return to:<br>SECRETARY OF STATE<br>450 N 4th STREET<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>REINSTATEMENT<br/>FEE DUE: \$30.00</b> |                | 1. Mailing Address: Correct in this box if needed.<br><br>SARAH ANDERSON, INC.<br>SARAH ANDERSON<br>PO BOX 998<br>VICTOR ID 83455 |        | 3. <u>New</u> Registered Agent Signature.                                                                         |                     |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.                              |                |                                                                                                                                   |        |                                                                                                                   |                     |
| Office Held                                                                                                                                   | Name           | Street or PO Address                                                                                                              | City   | State                                                                                                             | Country Postal Code |
| President                                                                                                                                     | Sarah Anderson | PO Box 998                                                                                                                        | Victor | ID                                                                                                                | USA 83455           |
| 5. Organized Under the Laws of: <b>IDAHO</b><br><b>C 163867</b>                                                                               |                |                                                                                                                                   |        |                                                                                                                   |                     |
| 6.                                                                                                                                            |                | Signature: <u>Sarah Anderson</u>                                                                                                  |        | Date: <u>4-5-11</u>                                                                                               |                     |
|                                                                                                                                               |                | Name (type or print): <u>Sarah Anderson</u>                                                                                       |        | Title: <u>President</u>                                                                                           |                     |
| Issued 04/04/2011 by 1.1                                                                                                                      |                |                                                                                                                                   |        |                                                                                                                   |                     |