

FILED EFFECTIVE

REINSTATEMENT

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| C 105339 | Annual Report Form ADMIN DISSOLVED 06/12/2006 | 2. Registered Agent and Office NOT A P.O. BOX |
| turn to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 EE DUE \$30.00 | 1. Mailing Address - Correct in this box, if applicable SPECIALTY MANAGEMENT, INC. ROBERTA R DAVIS PO BOX 103 COUNCIL, ID 83612 | SAMUEL DAVIS 1922 HWY 95 COUNCIL, ID 83612 3. New registered agent signature |

Corporations: Enter Names and Business Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|---------------|-------------------------------|-------------|--------------|------------|
| Secretary | Roberta Davis | Same as above | Council | Idaho | 83612 |
| Registered Agent | Samuel Davis | 2430 Lappin Lane | | | |

Organized under the laws of:

 IDAHO
 C 105339

6.

Signature

Name (Typed or

Samuel Davis

Date

9/11/06

Title

Reg Agent