

No. W 59240	Reinstatement Annual Report Form ADMIN DISSOLVED 05/06/2009		2. Registered Agent and Office (NOT A P.O. BOX) REBECCA E WILLIAMS 271 S STATE ST 880 E 2700S HAGERMAN ID 83332															
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. COLLECTIBLES UNLIMITED, LLC PO BOX 27 HAGERMAN ID 83332 880 E 2700 SOUTH HAGERMAN, ID 83332		3. <u>New</u> Registered Agent Signature.															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>member</td> <td>Rebecca E. Williams</td> <td>880 E 2700S</td> <td>Hagerman</td> <td>Gooding</td> <td></td> <td>83332</td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	member	Rebecca E. Williams	880 E 2700S	Hagerman	Gooding		83332
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
member	Rebecca E. Williams	880 E 2700S	Hagerman	Gooding		83332												
5. Organized Under the Laws of: IDAHO W 59240		6. Signature: <u>Rebecca E Williams</u> Date: _____ Name (type or print): <u>Rebecca E. Williams</u> Title: <u>Agent</u>																
Issued 06/01/2010 by JL1 member																		