

No. C 172050	Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2010		2. Registered Agent and Office (NOT A P.O. BOX) RAELYNN SCHKADE 608 ROOSEVELT ST #8 GRAND VIEW ID 83624																						
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. INTEGRITY FACTORING & CONSULTING, INC. PO BOX 546 GRAND VIEW ID 83624		3. New Registered Agent Signature.																						
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <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>Pres.</td><td>Raelynn Schkade</td><td>PO box 546</td><td>Grandview ID</td><td>Owyhee</td><td></td><td>83624</td></tr><tr><td>Vice Pres.</td><td>Jens Schkade</td><td>PO box 546</td><td>Grandview ID</td><td>Owyhee</td><td></td><td>83624</td></tr></tbody></table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres.	Raelynn Schkade	PO box 546	Grandview ID	Owyhee		83624	Vice Pres.	Jens Schkade	PO box 546	Grandview ID	Owyhee		83624
Office Held	Name	Street or PO Address	City	State	Country	Postal Code																			
Pres.	Raelynn Schkade	PO box 546	Grandview ID	Owyhee		83624																			
Vice Pres.	Jens Schkade	PO box 546	Grandview ID	Owyhee		83624																			
5. Organized Under the Laws of: IDAHO C 172050		6. <table border="1"><tr><td>Signature:</td><td></td><td>Date:</td><td>7/7/10</td></tr><tr><td>Name (type or print):</td><td>Raelynn Schkade</td><td>Title:</td><td>Pres.</td></tr></table>			Signature:		Date:	7/7/10	Name (type or print):	Raelynn Schkade	Title:	Pres.													
Signature:		Date:	7/7/10																						
Name (type or print):	Raelynn Schkade	Title:	Pres.																						
Issued 07/07/2010 by CLH																									