REINSTATEMENTILED EFFECTIVE

No. C 32190	ADMIN DISSOLVED 01/04/2008	2. Registered Agent and Office NOT A P.O. BOX ANN HOWELL
Return to:	1. Mailing Address - Correct in this box, if applicable	1784 SCIENCE CENTER DR
SECRETARY OF STATE 450 N 4th STREET PO BOX 63720 BOISE, ID 63720-0060	JOHN AND OLIVE ADAMS SCHOLARSHIP FO ANN HOWELL 2275 S BLVD	IDAHO FALLS, ID 83402
FEE DUE \$30.00	IDAHO FALLS, ID 83401	3. New registered agent signature
I Imited Liability Companies: F	nd Bueiness Addresses of President, Secretary and Directors nter Names and Addresses of management. artnerships: Enter names and addresses of at least two (2) partners.	
ARIA SALI NAMA	Street of P.O. Address	State Fills It 8340 &
Dres ann	Howell 1784 Serence Center dr.	
Sec. Bill	Savage 1767 Bluesky Dr.	<i>(</i>
Die Den	is Islasco 325 Edm St.	n 83402
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Au Mar	ge Heter 397 Identock Civ.	03 (0
5. Organized under the laws of:	Signature Unn Howell	Date 3/07/08
IDAHO	1 11 1011	Date Control of the state of th
C 32190	Name (Typed or Ann Howell	THO President

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1: Pay special attention to the mailing address. If the correct mailing 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 president, secretary, and directors (for corporations only), management (for LLCs only), or at least two (2) partners (for LPs and LLPs only. Note: Putting "same as last year" or "same as above" 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 corporation/LLC/LP/LLP. Print or type the name and title of the signer below the signature.