

REINSTATEMENT

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|---|--|-----------------------------------|--|--|--|
| No. C 173396 | Annual Report Form ADMIN DISSOLVED 09/04/2008 | | 2. Registered Agent and Office NOT A P.O. BOX | | |
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00 | 1. Mailing Address - Correct in this box, if applicable RIVER 9 CONSULTING, INC. 301 MEADOW RIDGE <i>7931 Hwy 44</i> EAGLE, ID 83616 <i>Star, Id 83669</i> | | LAREN R WALKER 301 MEADOW RIDGE EAGLE, ID 83616 | | |
| | | 3. New registered agent signature | | | |
| <p>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners.</p> <p><u>Office held</u> <u>Name</u> <u>Street or P.O. Address</u> <u>City</u> <u>State</u> <u>Zip</u></p> <p><i>President Laren R Walker 7931 Hwy 44 Star Id 83669</i></p> | | | | | |
| 5. Organized under the laws of: IDAHO C 173396 | <p>6. Signature <u><i>Laren R Walker</i></u> Date <u><i>9/24/08</i></u> Name <small>(Typed or Printed)</small> <u><i>Laren Walker</i></u> Title <u><i>President</i></u></p> | | | | |

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