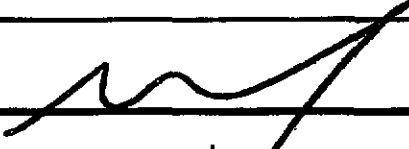


No. C 130184		Reinstatement Annual Report Form ADMIN DISSOLVED 11/10/2010		2. Registered Agent and Office (NOT A P.O. BOX) NEWMAN GILES 4050 LINCOLN RD IDAHO FALLS ID 83401	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. EAGLE EYE CLEARFIELD, INC. NEWMAN GILES PO BOX 460 IONA ID 83427		3. New Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
Pres	Newman Giles	PO Box 460	IONA	ID	83427
5. Organized Under the Laws of: IDAHO C 130184		6. Signature:  Name (type or print): NEWMAN GILES Date: 4/5/11 Title: President			
Issued 04/05/2011 by J.L1					