

No. W 66142	Reinstatement Annual Report Form ADMIN DISSOLVED 11/05/2009		2. Registered Agent and Office (NOT A P.O. BOX) BRYAN H LAMB 4549 W MARICOPA DR EAGLE ID 83616																					
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. BRYAN H. & SUSAN M. LAMB, LLC 4549 W MARICOPA DR EAGLE ID 83616																							
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>President</td><td>Bryan H. Lamb</td><td>4549 W. Maricopa Dr.</td><td>Eagle</td><td>ID</td><td>ADA</td><td>83616</td></tr><tr><td>Secretary</td><td>Susan M. Lamb</td><td>4549 W. Maricopa Dr.</td><td>Eagle</td><td>ID</td><td>ADA</td><td>83616</td></tr></tbody></table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Bryan H. Lamb	4549 W. Maricopa Dr.	Eagle	ID	ADA	83616	Secretary	Susan M. Lamb	4549 W. Maricopa Dr.	Eagle	ID	ADA	83616	3. New Registered Agent Signature.
Office Held	Name	Street or PO Address	City	State	Country	Postal Code																		
President	Bryan H. Lamb	4549 W. Maricopa Dr.	Eagle	ID	ADA	83616																		
Secretary	Susan M. Lamb	4549 W. Maricopa Dr.	Eagle	ID	ADA	83616																		
5. Organized Under the Laws of: IDAHO W 66142	5. Signature: <i>Bryan H. Lamb</i> Name (type or print): BRYAN H. LAMB		Date: 11-20-09 Title: President																					

Issued 11/19/2009 by SL1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM