

No. C 36648	Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) WESLEY M PARR 4385 135 LANE E RUPERT ID 83350	
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. IDAHOME FARMS, INC. WESLEY M PARR 438 S 135 LN EAST RUPERT ID 83350		3. <u>New</u> 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.	Wesley Parr	4385 135th E	Rupert	Id.	U.S.	83350
Sec.	Joan Parr	" " "	"	"	"	"

5. Organized Under the Laws of: <div style="text-align: center; padding: 10px;"> IDAHO C 36648 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Signature: <u>Wesley M. Parr</u></td> <td style="width: 30%;">Date: <u>1/21/2011</u></td> </tr> <tr> <td>Name (type or print): <u>Wesley M. Parr</u></td> <td>Title: <u>Pres.</u></td> </tr> </table>	Signature: <u>Wesley M. Parr</u>	Date: <u>1/21/2011</u>	Name (type or print): <u>Wesley M. Parr</u>	Title: <u>Pres.</u>
Signature: <u>Wesley M. Parr</u>	Date: <u>1/21/2011</u>				
Name (type or print): <u>Wesley M. Parr</u>	Title: <u>Pres.</u>				

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