

No. C 195165	Reinstatement Annual Report Form ADMIN DISSOLVED 09/10/2013		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 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. ROWEL E CATTLE CO., INC. 346 N 200 W MALAD CITY ID 83252 P.O. Box 52 Malad, ID 83262		JUSTIN D EDWARDS 346 N 200 W MALAD CITY ID 83252 3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>Justin Edwards</td> <td>P.O. Box 52</td> <td>Malad</td> <td>Id</td> <td>US</td> <td>83262</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Justin Edwards	P.O. Box 52	Malad	Id	US	83262
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	Justin Edwards	P.O. Box 52	Malad	Id	US	83262											
5. Organized Under the Laws of: IDAHO C 195165	6. Signature: <u>Justin Edwards</u> Name (type or print): <u>Justin Edwards</u> Date: <u>11/5/13</u> Title: <u>President</u>																

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM