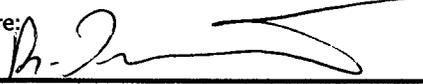




APPLICATION FOR REINSTATEMENT

To the SECRETARY OF STATE, STATE OF IDAHO

1. The name of the Idaho corporation applying for reinstatement following administrative dissolution or forfeiture, if available, is:
BRACES R US, INC.
2. The date of its incorporation was: March 10, 2003
3. The corporation hereby applies for reinstatement. If the entity name is unavailable, a certificate of amendment for a name change must be attached.

Signature: 

Title: Owner PICS

Date: 10-1-18

(must be signed by a chairman of the board of directors or officer of the corporation)

Secretary of State use only

No. C 148090	Reinstatement Annual Report Form ADMIN DISSOLVED 06/29/2018	2. Registered Agent and Office (NOT A P.O. BOX) TROY WILLIAMS 1431 N FILLMORE ST STE 100 TWIN FALLS ID 83301														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. BRACES R US, INC. TROY A WILLIAMS 1431 N FILLMORE ST STE 100 TWIN FALLS ID 83301	3. <u>New</u> Registered Agent Signature.														
REINSTATEMENT FEE DUE: \$30.00																
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.																
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office Held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td style="vertical-align: top;"><i>President</i></td> <td style="vertical-align: top;"><i>Troy Williams</i></td> <td style="vertical-align: top;"><i>1431 N. Fillmore st.</i></td> <td style="vertical-align: top;"><i>Twin Falls</i></td> <td style="vertical-align: top;"><i>ID.</i></td> <td style="vertical-align: top;"><i>USA</i></td> <td style="vertical-align: top;"><i>83301</i></td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	<i>President</i>	<i>Troy Williams</i>	<i>1431 N. Fillmore st.</i>	<i>Twin Falls</i>	<i>ID.</i>	<i>USA</i>	<i>83301</i>
Office Held	Name	Street or PO Address	City	State	Country	Postal Code										
<i>President</i>	<i>Troy Williams</i>	<i>1431 N. Fillmore st.</i>	<i>Twin Falls</i>	<i>ID.</i>	<i>USA</i>	<i>83301</i>										
5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO C 148090 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Signature: </td> <td style="width: 40%;">Date: <i>9-12-18</i></td> </tr> <tr> <td>Name (type or print): <i>Troy Williams</i></td> <td>Title: <i>Owner</i></td> </tr> </table>		Signature:	Date: <i>9-12-18</i>	Name (type or print): <i>Troy Williams</i>	Title: <i>Owner</i>										
Signature:	Date: <i>9-12-18</i>															
Name (type or print): <i>Troy Williams</i>	Title: <i>Owner</i>															
Issued 09/11/2018 by online																

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho, **not a Post Office Box or Personal Mail Box.**

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. **Note: DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1.** If more space is needed please add an attachment.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

**** The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.**

If the corporation is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections? _____