REINSTATEMENT

| No. W 404 | 60 | Annual Report Form ADMIN DISSOLVED 09/08/2009 1. Mailing Address - Correct in this box, if applicable NMH, LLC NEIL M HUNTER 6834 S BLACKCAT RD NAMPA, ID 83687 USA | | 2. Registered Agent and Office NOT A P.O. BOX NEIL M HUNTER 6834 S BLACKCAT RD NAMPA, ID 83687 3. New registered agent signature | | |
|--|-------------------------------|--|------------------------|--|------------------|--|
| Retum to: SECRETARY OF ST 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-00 FEE DUE \$30.00 | NMH NEIL 80 6834 NAM | | | | | |
| Limited Liability Con Limited and Limited Office held | mpanies: Enter Names an | Iddresses of President, Secretary and Directors of Addresses of management. Ider names and addresses of at least two (2) partners. Street or P.O. Address 6834 S B lackcat 6834 S B lackcat | City Nampa Nampa | State ID | z1p 83687 | |
| | | | | | | |
| | aws of: DAHO / 40460 | 6. Signature Man Mathematical Name (Typed or Neil M Hunter | Date . | 10-30 | o .09 Manager | |
| Issued 9/11/2 | 009 by CLH | | | | | |