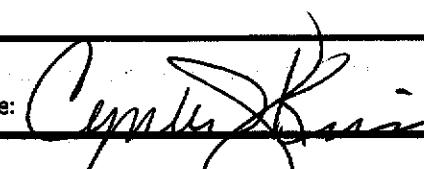


No. W 27496	Reinstatement Annual Report Form ADMIN DISSOLVED 03/06/2009		2. Registered Agent and Office (NOT A P.O. BOX) CYNTHIA J KINNER 4919 LENVILLE RD MOSCOW ID 83843		
Return to:  SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  KINNER CONSULTING LLC CYNTHIA J KINNER 4919 LENVILLE RD MOSCOW ID 83843 USA		3. New Registered Agent Signature.		
<b>REINSTATEMENT FEE DUE: \$30.00</b>					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.					
Office Held	Name	Street or PO Address	City	State	Country
MEMBER	CYNTHIA J KINNER	4919 LENVILLE RD	MOSCOW	ID	US
					83843
5. Organized Under the Laws of:	6.  Signature: <u>Cynthia J. Kinner</u> Date: <u>MAR 17 2010</u> Name (type or print): <u>CYNTHIA J KINNER</u> Title: <u>MEMBER</u>				
Issued 03/08/2010 by SLD					

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Pay special attention to the mailing address. If the correct 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 management. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

**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 limited liability company. Print or type the name of the signer below the signature.