

REINSTATEMENT

FILED EFFECTIVE

No. W 54769 Return to: SECRETARY OF STATE 460 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report Form ADMIN DISSOLVED 12/05/2008 CENTRAL ROOFING LLC 4890 S WILDBROOK BOISE, ID 83709	2. Registered Agent and Office NOT A P.O. BOX SINA DOMINGUEZ 4890 S WILDBROOK BOISE, ID 83709 <i>Tim Perkins</i> 3. New registered agent signature <i>Tim Perkins</i>																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td><i>Owner</i></td> <td>Tim Perkins</td> <td><i>4890 S. Wildbrook</i></td> <td><i>Boise</i></td> <td><i>Id</i></td> <td><i>83709</i></td> </tr> <tr> <td><i>Member</i></td> <td><i>Tim Perkins</i></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	<i>Owner</i>	Tim Perkins	<i>4890 S. Wildbrook</i>	<i>Boise</i>	<i>Id</i>	<i>83709</i>	<i>Member</i>	<i>Tim Perkins</i>				
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<i>Member</i>	<i>Tim Perkins</i>																			
5. Organized under the laws of: IDAHO W 54769	6. Signature <i>Tim Perkins</i> Date <i>12/21/08</i> Name (Typed or Printed) <i>Tim Perkins</i> Title <i>Member</i>																			

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: 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 (for corporations only), management (for LLCs only), or at least two (2) partners (for LPs and LLPs only. Note: Putting "same as last year" or "same as above" 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 corporation/LLC/LP/LLP. Print or type the name and title of the signer below the signature.