

REINSTATEMENT

W19061

No. W 19061		Annual Report Form ADMIN DISSOLVED 07/07/2003		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00		1. Mailing Address - Correct in this box, if applicable MAXON BUILDERS, L.L.C. PO BOX 4865 KETCHUM, ID 83340		KENT MAXON 111 FOUR SEASONS WY #12 KETCHUM, ID 83340													
				3. New registered agent signature													
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="0"><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>MB</td><td>KENT MAXON</td><td>P.O. BOX 4865</td><td>KETCHUM</td><td>ID</td><td>83340</td></tr></tbody></table>						Office held	Name	Street or P.O. Address	City	State	Zip	MB	KENT MAXON	P.O. BOX 4865	KETCHUM	ID	83340
Office held	Name	Street or P.O. Address	City	State	Zip												
MB	KENT MAXON	P.O. BOX 4865	KETCHUM	ID	83340												
5. Organized under the laws of: IDAHO W 19061			6. Signature <u>Kent Maxon</u> Date <u>12-1-06</u> Name (Typed or Printed) <u>KENT MAXON</u> Title <u>MBR</u>														