


**FILED EFFECTIVE**

No. <b>W 80088</b>	Reinstatement Annual Report Form <b>ADMIN DISSOLVED 03/04/2010</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> )
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT</b> <b>FEES \$100.00</b>	1. Mailing Address: Correct in this box if needed.		TROY WILLIAMS <del>4077 SAGE SPRINGS CIRCLE</del> <del>KIMBERLY ID 83341</del>
	TROY & JUDITH WILLIAMS LLC TROY WILLIAMS 4077 SAGE SPRINGS CIRCLE KIMBERLY ID 83341  1431 N. Fillmore Suite 100 Twin Falls, Id. 83301		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.			
Office Held	Name	Street or PO Address	City State Country Postal Code
<del>President of</del> Company mgr/mb Co-President	Troy A. Williams	1431 N. Fillmore Suite 100	Twin Falls, Id. 83301
	Judith Williams	1431 N. Fillmore Suite 100	Twin Falls, Id. 83301
5. Organized Under the Laws of:		6.	
IDAHO W 80088		Signature: 	Date: <u>March 3, 2010</u>
		Name (type or print): <u>Troy A. Williams</u>	Title: <u>mgr/mb</u>
Issued 03/30/2010 by CLH			