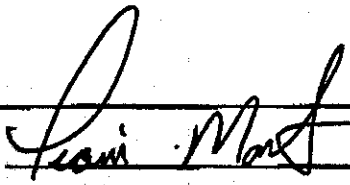


REINSTATEMENT

No. W 48299	Annual Report Form ADMIN DISSOLVED 06/08/2007		2. Registered Agent and Office NOT A P.O. BOX												
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable		TRAVIS D MARTIN 250 N 800 W												
	TRAVIS D. MARTIN FARMS, L.L.C.		BLACKFOOT, ID 83221												
	250 N 800 W														
	BLACKFOOT, ID 83221		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>Member</td> <td>Travis D. Martin</td> <td>250 N 800 W</td> <td>Blackfoot</td> <td>ID</td> <td>83221</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Member	Travis D. Martin	250 N 800 W	Blackfoot	ID	83221
Office held	Name	Street or P.O. Address	City	State	Zip										
Member	Travis D. Martin	250 N 800 W	Blackfoot	ID	83221										
5. Organized under the laws of: IDAHO W 48299	6. Signature  Date 10-16-07 Name (Typed or Printed) Travis Martin Title Member														

Issued 10/15/2007 by SL1

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.