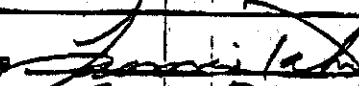


FILED EFFECTIVE

REINSTATEMENT

No. W 28192	Annual Report Form ADMIN DISSOLVED 04/10/2007		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 33720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address (If different from this form, it is applicable)		TAMMIE DAHMEN 163 W WALNUT #B GENESEE, ID 83832													
	POINTS OF VIEW LLC PO BOX 306 GENESEE, ID 83832		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="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>owner</td><td>Tammie Dahmen</td><td>444 Valleyview</td><td>Geneese</td><td>ID</td><td>83832</td></tr></tbody></table>					Office held	Name	Street or P.O. Address	City	State	Zip	owner	Tammie Dahmen	444 Valleyview	Geneese	ID	83832
Office held	Name	Street or P.O. Address	City	State	Zip											
owner	Tammie Dahmen	444 Valleyview	Geneese	ID	83832											
5. Organized under the laws of: IDAHO W 28192		6. Signature  Name (Typed or Printed) Tammie Dahmen		Date 6-19-08 Title owner												

Issued 6/19/2008 by CLH