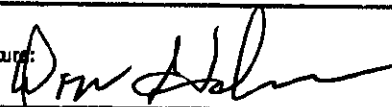


No. C 135657		Reinstatement Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		ADMIN DISSOLVED 12/04/2012		DON S HELMS 276 EAGLE CREST DR SAGLE ID 83860															
REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. NORTH IDAHO RV & TRUCK, INC. DON HELMS PO BOX 1727 SANDPOINT ID 83864 USA		3. New Registered Agent Signature.															
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.																			
<table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>PRES, V-P SEC/TREASURER</td><td>Don Helms</td><td>POB 1727</td><td>Sandpoint, ID</td><td>BONNER</td><td></td><td>83864</td></tr></tbody></table>						Office Held	Name	Street or PO Address	City	State	Country	Postal Code	PRES, V-P SEC/TREASURER	Don Helms	POB 1727	Sandpoint, ID	BONNER		83864
Office Held	Name	Street or PO Address	City	State	Country	Postal Code													
PRES, V-P SEC/TREASURER	Don Helms	POB 1727	Sandpoint, ID	BONNER		83864													
5. Organized Under the Laws of: IDAHO C 135657		6. Signature:  Name (type or print): <u>Don Helms</u> Date: <u>1/24/2013</u> Title: <u>PRES</u>																	
Issued 01/24/2013 by JLI																			

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM