REINSTATEMENT FILED EFFECTIVE

۷o.	C 167284		Annual Report Form ADMIN DISSOLVED 09/05/2007		2. Registered Agent and Office NOT A P.O. BOX CHRISTOPHER J BEESON		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00		SANFORI COLLIER 755 W FF	1. Mailing Address - Correct in this box, if applicable SANFORD & SONS, INC. COLLIERS INTERNATIONAL 755 W FRONT & SOND COLLIERS STREET - Suite 300 BOISE, ID 83702		601 W BANNOCK ST BOISE, ID 83702 3. New registered agent signature		
Li <u>C</u> i	mited Liability Companies mited and Limited Liabili ffice held	s: Enter Names and /	resses of President, Secretary and Directors Addresses of management. For names and addresses of at least two (2) partners. Street or P.O. Address 755 W. Front Street - Suite 30	ZHY	State Zip ID 83702		
5. Org	anized under the laws of IDAHO C 16728		6. Signature Name (Typed or George S. IIiff	Date	, ,		

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