

FILED EFFECTIVE

No. W 26605	Reinstatement Annual Report Form ADMIN DISSOLVED 01/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) VALERIE LAWRENCE 444 HWY 16 ST. 105 EMMETT ID 83617								
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. QUANTUM VISION ENTERPRISES LLC VALERIE LAWRENCE 444 HWY 16 STE 105 EMMETT ID 83617										
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.			3. <u>New</u> Registered Agent Signature.								
Office Held	Name	Street or PO Address		City State Country Postal Code							
<i>OWNER/member</i>	<i>VALERIE LAWRENCE</i>	<i>444 Hwy 16, ST. 105</i>	<i>Emmett, ID 83617</i>								
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Issued 01/28/2010 by KAH											