

FILED EFFECTIVE

No. W 13689	Reinstatement Annual Report Form ADMIN DISSOLVED 03/09/2007		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 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. KEITH JORGENSEN LLC KEITH JORGENSEN 503 BENCH LAGO RD GRACE ID 83241		KEITH JORGENSEN 503 BENCH LAGO RD GRACE ID 83241 3. New Registered Agent Signature.														
	4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <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></td><td>Member Keith Jorgensen</td><td>503 Bench Lago Rd</td><td>Grace</td><td>ID</td><td></td><td>83241</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code		Member Keith Jorgensen	503 Bench Lago Rd	Grace	ID	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
	Member Keith Jorgensen	503 Bench Lago Rd	Grace	ID		83241											
5. Organized Under the Laws of: IDAHO W 13689	6. Signature: <i>Keith L. B...</i> Name (type or print): Keith Jorgensen		Date: 12-18-08 Title: Member														