

No. W 56945		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 03/04/2010		CON PAULOS 901 S LINCOLN JEROME ID 83338															
REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. CDPIG, LLC CON P. PAULOS PO BOX 483 JEROME ID 83338		3. New Registered Agent Signature.															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																			
<table border="1"><thead><tr><th>Manager or Member</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><u>Manager</u> Member (circle one)</td><td>Con P. Paulos</td><td>PO Box 483</td><td>Jerome</td><td>ID</td><td>USA</td><td>83338</td></tr></tbody></table>						Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	<u>Manager</u> Member (circle one)	Con P. Paulos	PO Box 483	Jerome	ID	USA	83338
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code													
<u>Manager</u> Member (circle one)	Con P. Paulos	PO Box 483	Jerome	ID	USA	83338													
5. Organized Under the Laws of: IDAHO W 56945		6.  Signature: _____ Name (type or print): Con P. Paulos		Date: 12-13-11 Title: <u>Mgrt Agent</u>															
Issued 12/13/2011 by CLH																			