REINSTATEMENT

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No. W	22337		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 FEE DUE \$30.00		04/10/2007 1. Mailing Address - Correct in this box, if applicable APPRAISAL SOURCE APPRAISAL PROFESSI THOMAS MULLANEY III 1217 W HAYS BOISE, ID 83702					THOMAS MULLANEY III 1217 W HAYS BOISE, ID 83702 3. New registered agent signature		
						BOISE			
						3. <u>New</u> re			
Limited Lia		r Names and / nerships: Ente	Addresses of mana r names and addr Street or F	agement. esses of at leas 2.O. Address		Çity	State	Zip	
MEMBER	THOMAS F.	MULLAVEJI	12174	N. HAYS	· ·	Boise	ID	83702	
5. Organized ur	ider the laws of: IDAHO W 22337		6. Signature	Thomas.	MMMM F. MULLANEX	TTL	Date <u>05/13</u> Title <u>Owner/1</u>	MEMBER MEMBER	

Issued 5/13/2008 by LJM