FILED EFFECTIVE

No. W 11424	Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2010	2. Registered Agent and Office (NOT A P.O. BOX) BLAINE THOMAS 2145 S GRANT AVE POCATELLO ID 83204
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. CLASSIC MARBLE & GRANITE, LLC KIM THOMAS 2145 S GRANT AVE POCATELLO ID 83204 USA	3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: $30.00		

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
	Blaine Thomas	2145 So Grant	Pocatello	ID	USA	83204
	Kim Thomas	2145 So Grant	Pocatello	ID	USA	83204

5. Organized Under the Laws of:	6.
IDAHO W 11424	Signature: Kim Thomas Date: 8/4/10 Name (type or print): Kim Thomas Title: Member

Issued 08/04/2010 by CLH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the