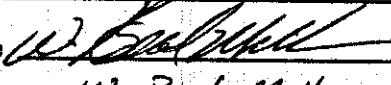


REINSTATEMENT

No. C 101309	Annual Report Form ADMIN DISSOLVED 06/05/2008		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	1. Mailing Address - Correct in this box, if applicable A & B TRANSMISSION & SERVICE CENTER W BRAD MILLER 183 E CENTER SHELLEY, ID 83274		W BRAD MILLER 183 E CENTER SHELLEY, ID 83274 3. New registered agent signature																			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>W. Brad Miller</td> <td>183 E Center</td> <td>Shelley</td> <td>Id.</td> <td>83274</td> </tr> <tr> <td>Sec/Treas.</td> <td>W. Brad Miller</td> <td>183 E Center</td> <td>Shelley</td> <td>Id.</td> <td>83274</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	W. Brad Miller	183 E Center	Shelley	Id.	83274	Sec/Treas.	W. Brad Miller	183 E Center	Shelley	Id.	83274
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Sec/Treas.	W. Brad Miller	183 E Center	Shelley	Id.	83274																	
5. Organized under the laws of: IDAHO C 101309		6. Signature  Date <u>6/23/08</u> Name (Typed or Printed) <u>W. Brad Miller</u> Title <u>President</u>																				

Issued 6/12/2008 by LJM