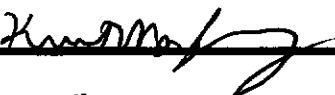


No. W 60548	Reinstatement Annual Report Form ADMIN DISSOLVED 06/14/2011		2. Registered Agent and Office (NOT A P.O. BOX) KURT MAYBERRY 1343 S MORNINGSIDE DR REXBURG ID 83440		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. EMERGENCY ZONE, LLC KURT R MAYBERRY 1343 S MORNINGSIDE DR REXBURG ID 83440 USA		3. New Registered Agent Signature.		
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.					
Manager or Member	Name	Street or PO Address	City	State Country	Postal Code
Manager <input checked="" type="radio"/> Member (circle one)					
Kurt Mayberry		1343 S. Morningside Dr	Rexburg	ID USA	83440
5. Organized Under the Laws of: IDAHO W 60548		6. Signature:  Name (type or print): <u>Kurt Mayberry</u>		Date: <u>7-10-11</u> Title: <u>managing member</u>	
Issued 07/07/2011 by KAH					