No. W 25008	Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2011 2. Registered Agent and Office (NOT A P.O. BOX) BRADFORD PAINE SHAW	
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. LEXOLA LLC BRADFORD P SHAW 4937 N HOLLOW LANE BOISE ID 83702 USA	4937 N HOLLOW LANE BOISE ID 83702 3. New Registered Agent Signature.
REINSTATEMENT FEE DUE: \$30.00		
4. Limited Liability Compan Manager or Member Nan	ies: Enter Names and Addresses of Managers OR Members. Street or PO Address	See Instructions. City State Country Postal Code
Manager Member (circle one) Brad Grad Pail	ine Show 4937 N. Hollow Lan	ne Boise 110 Ada 83702
5. Organized Under the Laws o	f: 6.	Date: Ala al
IDAHO W 25008	Name (type or print): Bradford Rine S	Shaw Title: Member
Issued 10/20/2011 by SLD		