

REINSTATEMENT

No. L 5070	Annual Report Form		2. Registered Agent and Office NOT A P.O. BOX																		
Return to:	ADMIN TERMINATED 12/05/2007		HELEN FELLER																		
SECRETARY OF STATE	1. Mailing Address - Check this box, if applicable		422 N GEORGIA AVE																		
450 N 4th STREET	WINDMILL, L.P.		CALDWELL, ID 83605																		
PO BOX 83720	HELEN FELLER																				
BOISE, ID 83720-0080	422 N GEORGIA AVE		3. New registered agent signature																		
FEE DUE \$30.00	CALDWELL, ID 83805																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management Limited Partnerships and LLPs: Enter Names and Addresses of all General Partners 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>GP</td> <td>Helen Feller</td> <td>422 N Georgia Ave</td> <td>Caldwell</td> <td>ID</td> <td>83605</td> </tr> <tr> <td>GP</td> <td>Jan Feller</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	GP	Helen Feller	422 N Georgia Ave	Caldwell	ID	83605	GP	Jan Feller	"	"	"	"
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GP	Helen Feller	422 N Georgia Ave	Caldwell	ID	83605																
GP	Jan Feller	"	"	"	"																
5. Organized under the laws of: IDAHO L 5070		6. Signature <u>Helen Feller</u> Date <u>12-10-07</u> Name (Typed or Printed) <u>Helen Feller</u> Title <u>GP</u>																			

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 STATE OF IDAHO
 SECRETARY OF STATE

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