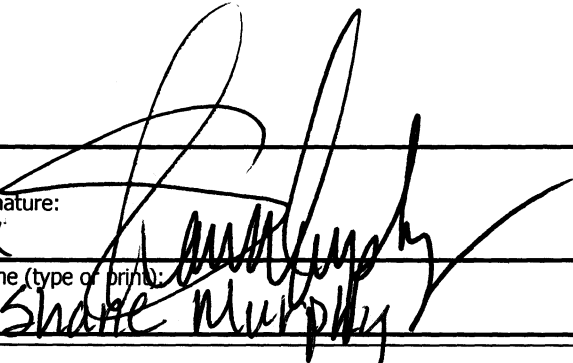


No. C 151415	Reinstatement Annual Report Form ADMIN DISSOLVED 01/04/2008		2. Registered Agent and Office (NOT A P.O. BOX) SHANE MURPHY 434 GLADSTONE IDAHO FALLS ID 83402														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. KOOL BEANZ, INC. SHANE MURPHY 434 GLADSTONE IDAHO FALLS ID 83402		3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Shane Murphy</td> <td>PO Box 2363</td> <td>Idaho Falls</td> <td>ID</td> <td>USA</td> <td>83403</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Shane Murphy	PO Box 2363	Idaho Falls	ID	USA	83403
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	Shane Murphy	PO Box 2363	Idaho Falls	ID	USA	83403											
5. Organized Under the Laws of: IDAHO C 151415	6. Signature:  x Name (type or print): <u>Shane Murphy</u>			Date: <u>3-18-14</u> Title: <u>President</u>													

Issued 03/14/2014 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM