REINSTATEMENT

No. W 52444	Annual Report Form ADMIN DISSOLVED 10/10/2007	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 MB THOMPSON, LLC MARK THOMPSON ~~10591 S 15TH E~~ 3456 E 17th #140 IDAHO FALLS, ID ~~83404~~ 83406	MARK THOMPSON 10591 S 15TH E IDAHO FALLS, ID 83404 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.

Office held	Name	Street or P.O. Address	City	State	Zip
Manager	Rob Thompson	11235 S. Bellerive Dr	Idaho Falls	Id	83401

FILED EFFECTIVE
07 DEC 24 PM 12:47
SECRETARY OF STATE
STATE OF IDAHO

5. Organized under the laws of:
IDAHO
W 52444

6. Signature _____ Date 12/19/07

Name (Typed or Printed) Rob Thompson Title Manager

Issued 12/19/2007 by SL1