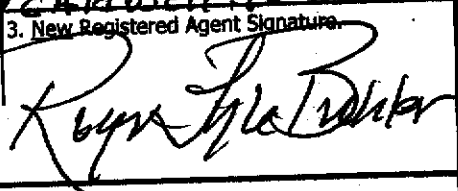
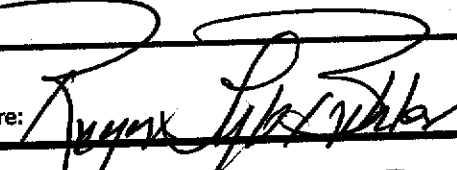


FILED EFFECTIVE

No. W 21817	Reinstatement Annual Report Form ADMIN DISSOLVED 03/04/2010		2. Registered Agent and Office (NOT A P.O. BOX) JOHN OWEN 19410 BLUEBELL CRT NAMPA ID 83687 ROGER Buhler															
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.		3. New Registered Agent Signature															
	10X LLC 19410 BLUEBELL CRT NAMPA ID 83687 2805 BLAINE ST STE 110 CAIDWELL ID 83605		CAIDWELL ID 83606 															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <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>OWNER</td><td>ROGER Buhler</td><td>PO 517</td><td>CAIDWELL</td><td>ID</td><td>Cayman</td><td>83606</td></tr></tbody></table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code	OWNER	ROGER Buhler	PO 517	CAIDWELL	ID	Cayman	83606
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
OWNER	ROGER Buhler	PO 517	CAIDWELL	ID	Cayman	83606												
5. Organized Under the Laws of: 6. IDAHO W 21817		Signature:  Name (type or print): ROGER LYLE Buhler	Date: 4-13-10 Title: OWNER															
Issued 04/13/2010 by DK1																		