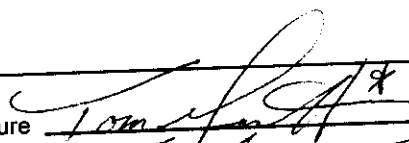


FILED EFFECTIVE

REINSTATEMENT

No. W 16906	Annual Report Form ADMIN DISSOLVED 01/07/2004		2. Registered Agent and Office NOT A P.O. BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable		TOM ARTHUR GUSCOTT 507 S LINCOLN SANDPOINT, ID 83864		
ARLO'S, L.L.C 330 N 1ST AVE SANDPOINT, ID 83864		3. <u>New</u> registered agent signature			
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input checked="" type="checkbox"/> Members (check one)					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PARTNER	TOM GUSCOTT	507 S. LINCOLN AVE	SANDPOINT	ID	83864
PARTNER	LISA GUSCOTT	507 S. LINCOLN AVE	SANDPOINT	ID	83864
PARTNER	CHRIS ARLO	720 N. THIRD APT #5	SANDPOINT	ID	83864
5. Organized under the laws of: IDAHO W 16906		6. Signature  Name (Typed or Printed) <u>TOM GUSCOTT</u>		Date <u>1/19/04</u> Title <u>PARTNER</u>	