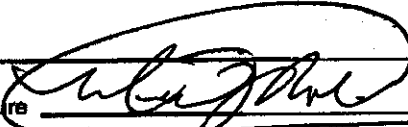
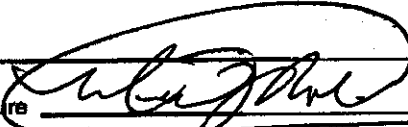
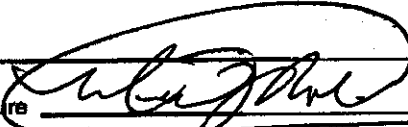


REINSTATEMENT FILED EFFECTIVE

No. W 24861	Annual Report Form ADMIN DISSOLVED 09/04/2008		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		MICHAEL ROLLINS 260 FIRST AVE N 208 SPRUCE STREET KETCHUM, ID 83340								
	TIME OUT CONSULTING, LLC PO BOX 769 SUN VALLEY, ID 83353										
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. <table border="0" data-bbox="105 504 1502 546"><tr><td>Office held</td><td>Name</td><td>Street or P.O. Address</td><td>City</td><td>State</td><td>Zip</td></tr></table> MEMBER MICHAEL ROLLINS P.O. BOX 769 SUN VALLEY ID 83353				Office held	Name	Street or P.O. Address	City	State	Zip		
Office held	Name	Street or P.O. Address	City	State	Zip						
5. Organized under the laws of: IDAHO W 24861		6. <table border="0" data-bbox="576 787 1502 903"><tr><td>Signature</td><td></td><td>Date</td><td>11/5/08</td></tr><tr><td>Name (Typed or Printed)</td><td>MICHAEL ROLLINS</td><td>Title</td><td>MEMBER</td></tr></table>		Signature		Date	11/5/08	Name (Typed or Printed)	MICHAEL ROLLINS	Title	MEMBER
Signature		Date	11/5/08								
Name (Typed or Printed)	MICHAEL ROLLINS	Title	MEMBER								

Issued 11/5/2008 by SL1