

State of Idaho

Office of the Secretary of State

LIMITED LIABILITY COMPANY REINSTATEMENT CERTIFICATE

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that the articles of organization of **PETTINGILL ENTERPRISES, LLC**, file number W 33246 , a limited liability company organized under the laws of the State of Idaho, was administratively dissolved on December 9, 2011, for failure to file the required annual report form by the date due.

I FURTHER CERTIFY That the limited liability company has on January 4, 2012, been reinstated on the records of this office, and that its articles of organization in the State of Idaho are hereby restored.

Dated: January 4, 2012



Ben Yursa

SECRETARY OF STATE

By

[Signature]



APPLICATION FOR REINSTATEMENT

To the SECRETARY OF STATE, STATE OF IDAHO

12 JAN -4 AM 9:01

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the Idaho limited liability company applying for reinstatement following administrative dissolution or forfeiture, if available, is:
PETTINGILL ENTERPRISES, LLC
2. The date of its organization was: September 15, 2004
3. The limited liability company hereby applies for reinstatement. If the entity name is unavailable, a certificate of amendment for a name change must be attached.

Signature: Liam M Snyder POA for Lewis J. Pottingill

Manager or Member: Member

Date: 12-31-11

(must be signed by a manager or member of the LLC)

Secretary of State use only

IDAHO SECRETARY OF STATE
01/04/2012 05:00
CK: 1583 CT: 26593 BH: 130433
1 @ 30.00 = 30.00 CORP REINS # 2

DURABLE POWER OF ATTORNEY

BY THIS DURABLE POWER OF ATTORNEY, We, Lewis J. Pettingill and Jeri L. Pettingill, of Canyon County, Idaho, appoint as our attorney-in-fact to manage our affairs: Leiann M. Snyder.

The rights, powers and authority of said attorney-in-fact herein granted shall commence and be in full force and effect as of 8:00 a.m., E.S.T., on the date hereof, and such rights, powers and authority shall remain in full force and effect thereafter until such power terminates by virtue of my death or the recordation in the Public Records of Canyon County, Idaho of a revocation of this Durable Power of Attorney, executed by us, and by no other method. This Durable Power of Attorney is granted under and pursuant to applicable state law, and is nondelegable. This Durable Power of Attorney shall not be affected by disability of the principal except as provided by applicable state law.

All of our property and interests in property are subject to this Durable Power of Attorney.

Without limiting the Broad powers conferred by the preceding provisions, we authorize our attorney-in-fact to:

(1) Collect sums of money and other property that may be payable or belonging to me and to execute receipts, releases, cancellations or discharges.

(2) Settle any account in which we have any interest and to pay or receive the balance of that account as the case may require.

(3) Enter any safe deposit box or other place of safekeeping standing in my name alone or jointly with another and to remove the contents and to make additions, substitutions and replacements.

(4) Borrow money on such terms and with such security as our attorney may think fit and to execute all mortgages and other instruments that our attorney finds necessary or desirable.

(5) Draw, accept, endorse or otherwise deal with any checks or other commercial or mercantile instruments, specifically including the right to make withdrawals from any savings account or building and loan deposits.

(6) Redeem bonds issued by the United States Government or any of its agencies, any other bonds and any certificates of deposit or other similar assets belonging to us.

and notice of that revocation to our attorney shall be valid unless the person claiming the benefit of the act had notice of that revocation.

I hereby revoke all powers of attorney heretofore given by us to my said attorney.

In the event any portion of this Power of Attorney is declared void for any reason under the laws of the State of Idaho, we intend that all the rest and remainder of this power shall remain in full force and effect.

IN WITNESS WHEREOF, we have set our hand and seal on the 18th day of January, 2008.

[Signature]
[Name]

[Signature]
[Name]

Signed, sealed and delivered
in the presence of:

[Signature]
Witness

[Signature]
Witness

ACKNOWLEDGMENT

STATE OF Idaho)
COUNTY OF Canyon) S.S:

The foregoing Instrument was acknowledged before me, an officer duly authorized in the State of Idaho and County aforesaid, to take acknowledgments, this 18th day of January, 2008, by

- is personally known to me; or
- who has produced driver's licences as identification;
- and who:
- did, or
- did not, take an oath