
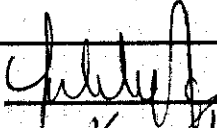


# REINSTATEMENT

FILED EFFECTIVE

<b>No. W 50631</b>	<b>Annual Report Form</b> <b>ADMIN DISSOLVED 08/06/2007</b>		<b>2. Registered Agent and Office NOT A PO BOX</b>																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>FEE DUE \$30.00</b>	<b>1. Mailing Address</b> <small>Correct in this box, if applicable</small>		LAMBERT ANDRUS 1761 S VON ELM																			
	ALWAYS PRECISION PANEL, LLC  1761 S VON ELM  POCATELLO, ID 83201		POCATELLO, ID 83201  <b>3. New registered agent signature</b> 																			
<b>4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors</b> <b>Limited Liability Companies: Enter Names and Addresses of management.</b> <b>Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners.</b> <table border="1" data-bbox="99 483 1536 630"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Lambert Andrus</td> <td>1761 S Von Elm</td> <td>Pocatello</td> <td>ID</td> <td>83201</td> </tr> <tr> <td>Manager</td> <td>Kimberly Andrus</td> <td>1761 S Von Elm</td> <td>Pocatello</td> <td>ID</td> <td>83201</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Lambert Andrus	1761 S Von Elm	Pocatello	ID	83201	Manager	Kimberly Andrus	1761 S Von Elm	Pocatello	ID	83201
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Manager	Kimberly Andrus	1761 S Von Elm	Pocatello	ID	83201																	
<b>5. Organized under the laws of:</b>  IDAHO W 50631		<b>6.</b> Signature  Name (Typed or Printed) <u>Kimberly Andrus</u> Date _____ Title <u>Manager/Member</u>																				

Issued 08/16/2007 by KAH