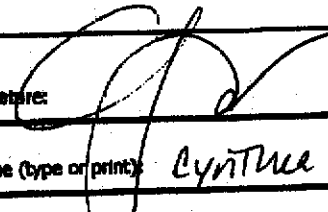


No. W 20294	Reinstatement Annual Report Form ADMIN DISSOLVED 11/07/2005		2. Registered Agent and Office (NOT A P.O. BOX)														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. GRANITE CHIEF, L.L.C. CYNTHIA WOOLLEY 409 N MAIN ST P.O. Box 6999 HARLEY ID 83383 Ketchum, ID 83340		100 WEST FIRST STREET STE 107 KETCHUM ID 83340 200 W. River St. Ste 301 Ketchum, ID 83340														
3. New Registered Agent Signature.																	
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></td><td>Mem. Cynthia Woolley</td><td>P.O. Box 6999</td><td>Ketchum</td><td>ID</td><td>USA</td><td>83340</td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code		Mem. Cynthia Woolley	P.O. Box 6999	Ketchum	ID	USA	83340
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
	Mem. Cynthia Woolley	P.O. Box 6999	Ketchum	ID	USA	83340											
5. Organized Under the Laws of: IDAHO W 20294	6. Signature:  Name (type or print): Cynthia Woolley			Date: 5/9/2010 Title: Member													
Issued 05/06/2010 by DK1																	