

FILED EFFECTIVE

No. W 28706	Reinstatement Annual Report Form ADMIN DISSOLVED 05/06/2009		2. Registered Agent and Office (NOT A P.O. BOX) TRENT A ANDRUS 4537 JUNIPER AVE REXBURG ID 83440														
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. TALYN, LLC TRENT A ANDRUS 4537 JUNIPER AVE REXBURG ID 83440																
	3. New Registered Agent Signature. <i>Trent A Andrus</i>																
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><i>Trent A. Andrus</i></td><td><i>4537 Juniper Ave</i></td><td><i>Rexburg Id.</i></td><td><i>USA</i></td><td><i>83440</i></td><td></td></tr></tbody></table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code		<i>Trent A. Andrus</i>	<i>4537 Juniper Ave</i>	<i>Rexburg Id.</i>	<i>USA</i>	<i>83440</i>	
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5. Organized Under the Laws of: IDAHO W 28706		6. <table border="1"><tr><td>Signature: <i>T+AAH</i></td><td>Date: <i>5/13/09</i></td></tr><tr><td>Name (type or print): <i>Trent A Andrus</i></td><td>Title: <i>Owner</i></td></tr></table>		Signature: <i>T+AAH</i>	Date: <i>5/13/09</i>	Name (type or print): <i>Trent A Andrus</i>	Title: <i>Owner</i>										
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