No. C 165379	Reinstatement Annual Report Form ADMIN DISSOLVED 06/17/2014 1. Mailing Address: Correct in this box if needed. ICMS GROUP, INC. DONALD D. WALTERS 320 E. NEIDER //2/7 N. Cattle Dr SUITE 207- CDEUR D'ALENE ID 83815 HAYDON, ID 8383			2. Registered Agent and Office (NOT A P.O. BOX) DONALD D WALTERS 320 E. NEIDER 1/2/17 N. Co. HTE Dr. SUITE 207 COEUR D'ALENE ID 83815 Hayden, 1D 83835 3. New Registered Agent Signature.	
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.					
Office Held	Name	Street or PO A		y State Co	untry Postal Code Codewni 83835
President	Downld D	. Walters 11217N	, <u>(</u> , <u>1</u>	7	
5. Organized Under the La	1	_			
IDAHO C 165379	Name (type or print): Downld D. Workers			}	Date: 6/24/14 Title: President
					President
issued 06/24/2014 by onlin	re				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM