

REINSTATEMENT

No. W 4826	Annual Report Form ADMIN DISSOLVED 01/07/2004		2. Registered Agent and Office NOT A P.O. BOX																															
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address. <i>Correct in this box, if applicable</i> KRAYLOR, L.L.C. LYNN KRANTZ 1592 DELMAR CIRCLE IDAHO FALLS, ID 83404		LYNN KRANTZ 1592 DELMAR CIRCLE IDAHO FALLS, ID 83404 3. New registered agent signature _____ DATE _____																															
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td colspan="6"><i>MEMBERS LLC:</i></td> </tr> <tr> <td></td> <td>JEFF KRANTZ</td> <td>1559 DEL MAR CIRCLE</td> <td>IDAHO FALLS</td> <td>IDAHO</td> <td>83404</td> </tr> <tr> <td></td> <td>LYNN KRANTZ</td> <td>1592 DEL MAR CIRCLE</td> <td>IDAHO FALLS</td> <td>IDAHO</td> <td>83404</td> </tr> <tr> <td></td> <td>DOYLE LAMB</td> <td>PO BOX 860</td> <td>CHALLIS</td> <td>IDAHO</td> <td>83226</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<i>MEMBERS LLC:</i>							JEFF KRANTZ	1559 DEL MAR CIRCLE	IDAHO FALLS	IDAHO	83404		LYNN KRANTZ	1592 DEL MAR CIRCLE	IDAHO FALLS	IDAHO	83404		DOYLE LAMB	PO BOX 860	CHALLIS	IDAHO	83226
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5. Organized under the laws of: IDAHO W 4826		6. Signature <u><i>Lynn Krantz</i></u> Date <u>2-3-04</u> Name <u>LYNN KRANTZ</u> Title <u>SECRETARY</u>																																

Issued 01/28/2004