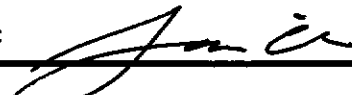
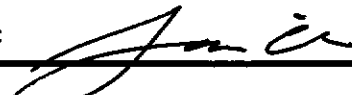
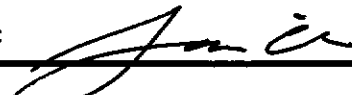


No. W 86745	Reinstatement Annual Report Form ADMIN DISSOLVED 12/07/2010		2. Registered Agent and Office (NOT A P.O. BOX) AARON OCONNOR 3361 BRIAR CREEK LN AMMON ID 83406										
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. IN AND OUT AUTO GLASS L.L.C. 2184 CHANNING WY #147 IDAHO FALLS ID 83404		3. <u>New</u> Registered Agent Signature.										
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.													
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 10%; text-align: left;">Manager / <u>Member</u></th> <th style="width: 25%; text-align: left;">Name</th> <th style="width: 30%; text-align: left;">Street or PO Address</th> <th style="width: 10%; text-align: left;">City</th> <th style="width: 10%; text-align: left;">State</th> <th style="width: 10%; text-align: left;">Country</th> <th style="width: 5%; text-align: left;">Postal Code</th> </tr> </table>					Manager / <u>Member</u>	Name	Street or PO Address	City	State	Country	Postal Code		
Manager / <u>Member</u>	Name	Street or PO Address	City	State	Country	Postal Code							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">AARON</td> <td style="width: 25%;">O'Connor</td> <td style="width: 30%;">331481 oak meadow circle</td> <td style="width: 10%;">Ammon</td> <td style="width: 10%;">ID</td> <td style="width: 10%;">Bonn</td> <td style="width: 5%;">83406</td> </tr> </table>							AARON	O'Connor	331481 oak meadow circle	Ammon	ID	Bonn	83406
AARON	O'Connor	331481 oak meadow circle	Ammon	ID	Bonn	83406							
5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; margin-top: 20px;"> IDAHO W 86745 </div>		6. <table style="width: 100%; border-collapse: collapse; margin-top: 20px;"> <tr> <td style="width: 70%;">Signature: </td> <td style="width: 30%;">Date: 12/27/10</td> </tr> <tr> <td>Name (type or print): AARON O'CONNOR</td> <td>Title: Member Owner</td> </tr> </table>					Signature: 	Date: 12/27/10	Name (type or print): AARON O'CONNOR	Title: Member Owner			
Signature: 	Date: 12/27/10												
Name (type or print): AARON O'CONNOR	Title: Member Owner												
Issued 12/22/2010 by JL1													

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address.
Note: To ensure future mailings, the corrected address **must** be inside Block 1.

The office of the