REINSTATEMENT

No. C 117347	Annual Report Form	2. Registered Agend and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST COPERSON	Mailing Address - Please Correct, If Not Correct	LYMAN L KEARSLEY
		515 W BRIDGE
P.O. BOX 10720	TETON INVESTIGATIONS & SECURITY,	INC. BLACKFOOT ID 83221
BO(502)D 83720-0080	LYMAN L KEARSKEY	
ADMÍN. DISS. 2/6/98 FEE DUE \$30.00	PO BOX 1228	3. Organized Under the Laws of:
	BLACKFOOT ID 83221	Idaho #117347
Limited Liability Compani		nbers (check one) City State Zip
President, Unector Director	Name Street or P.O. Address Lyman Karsley & 7 W 215N Laurie Klausley & 7 W 215N B	Blackfoot, Ideho 8321 lackfoot, Idaho 8321
5. Signature of New Registe	red Agent 6.	
- Assertation	Signature Lynan K	gwely Date 21har 981
∞ ⊩	Name Printed Lyman Ke	raisley Title Presidenti.
.) Please pay special attention	RUCTIONS FOR THE IDAHO ANNUAL F	
In the registered agent has PHYSICAL ADDRESS. PO Corporation: Enter names: Limited Liability Company: NOTE: Putting "same as la Limited Liability Company: position by signing in block Corporation: Block 6 must	siness entity cannot be altered on the annual report form. changed or moved, please make that correction on this form. It is boxes WILL NOT be accepted. If report is for a Limited Liability and addresses of ONLY the president, secretary, and directors Enter the names and addresses of the managers or members st year" WILL NOT be accepted. If the registered agent has been changed in block 2, then the the second of the second of the registered agent has been changed in block 2, then the the second of the second of the registered agent has been changed in block 2, then the the second of the second of the registered agent has been changed in block 2, then the second of	The registered agent must be found IN IDAHO at a ty please refer to #4 below. in block 4. in block 4. NEW registered agent must accept that the plant in the pla