REINSTATEMENT

No.	C 158577	Annual Report Form ADMIN DISSOLVED 04/10/2006 2. Registered Agent and Office NOT A P.O. BOX EDWARD C YOUMANS
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00		1 Mailing Address - Correct in this box, if applicable 122 WILDERNESS DR
		ROI, INC. EDWARD C YOUMANS PO BOX 613 KETCHUM, ID 83340 GIMLET, ID 83340 3. New registered agent signature
4.	Corporations: Enter Names and Limited Liability Companies: Enter	Names and Addresses of D Managers or D Members (check one)
	Office held Name	Street or P.O. Address City State Zip
	ESIDENT EDWAR DIRECTOR	C. YOUMANS P.O. BOX 613 HETCHUM AD \$3340
	e de la companya de	and the second s
5. Organized under the laws of:		6. Signatura C. 4/mage 7/21/0/
\ _{3}	IDAHO C 158577	Name (Typed or Printed) Name (Typed or Printed) Name (Typed or Printed)

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