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10/20/2010 9:11:03 AM PAGE 2/003 Fax Server

No. W 46579		Reinstatement Annual Report Form ADMIN DISSOLVED 04/06/2010		2. Registered Agent and Office (NOT A P.O. BOX) KALEN T SCARLETT 7069 HELENA ST BONNERS FERRY ID 83805															
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0000		1. Mailing Address: Correct in this box if needed. YOUR WAY CONSTRUCTION LLC KALEN T SCARLETT 7069 HELENA ST BONNERS FERRY ID 83805-7743 USA		3. (New) Registered Agent Signature:															
REINSTATEMENT FEE DUE: \$30.00																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.																			
<table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>Member</td><td>KALEN T SCARLETT</td><td>7069 Helena St</td><td>Bonnors ID</td><td>Idaho</td><td>USA</td><td>83805</td></tr></tbody></table>						Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Member	KALEN T SCARLETT	7069 Helena St	Bonnors ID	Idaho	USA	83805
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Member	KALEN T SCARLETT	7069 Helena St	Bonnors ID	Idaho	USA	83805													
5. Organized Under the Laws of: IDAHO W 46579		6. Signature:  Name (Type or Print): <u>Kalen T. Scarlett</u> Title: <u>Member</u> Date: <u>10-19-10</u>																	
Issued 10/20/2010 by IOH																			

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. **Notes:** To ensure future mailings, the corrected address must be in Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Notes:** The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Notes:** Do not put "none on last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.