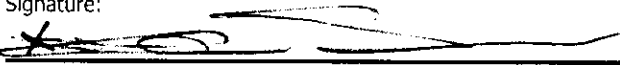


No. C 195816	Reinstatement Annual Report Form ADMIN DISSOLVED 12/01/2014		2. Registered Agent and Office (NOT A P.O. BOX) JASON SCHREIER 3937 EAST 144 NO RIGBY ID 83442																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. AARONS GLASS INC JASON SCHREIER PO BOX 276 IONA ID 83427		3. <u>New</u> Registered Agent Signature.																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>Pres</td> <td>Jason Schrier</td> <td>3937 East 144th NO</td> <td>Rigby</td> <td>ID</td> <td></td> <td>83442</td> </tr> <tr> <td>Sec</td> <td>Kacey Schrier</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Pres	Jason Schrier	3937 East 144th NO	Rigby	ID		83442	Sec	Kacey Schrier	"	"	"	"	"
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Sec	Kacey Schrier	"	"	"	"	"																		
5. Organized Under the Laws of: IDAHO C 195816		6. Signature:  Name (type or print): <u>JASON SCHREIER</u> Date: <u>12/20/14</u> Title: <u>Pres</u>																						