FILED EFFECTIVE

No. W 32811	Reinstatement Annual Report Form ADMIN DISSOLVED 11/06/2008	2. Registered Agent and Office **(NOT A P.O. BOX)** PATRICIA LETELIER 5124 REDBRIDGE DR BOISE ID 83709
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	**1. Mailing Address: Correct in this box if needed.** 601 LLC P.O. Box 274 ~~1770 W STATE ST #37~~ BOISE ID 8370~~1~~	3. New Registered Agent Signature.
REINSTATEMENT **FEE DUE: $30.00**		

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
manager member	Patricia Letelier	~~P.O. Box~~ ~~27~~ 5124 Redbridge Dr	Boise	~~ID~~		83703

5. Organized Under the Laws of:

IDAHO
W 32811

6.

Signature: Patricia Letelier Date: 3/25/10

Name (type or print): Patricia Letelier Title: manager

Issued 03/25/2010 by LJM