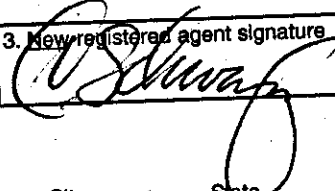
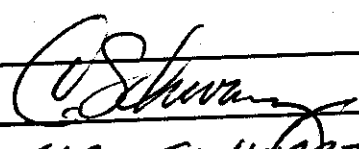


REINSTATEMENT

FILED EFFECTIVE No. C 59026		Annual Report Form ADMIN DISSOLVED 11/08/2007		2. Registered Agent and Office NOT A P.O. BOX SAM HOVEY CARY SCHWARTZ 178 HIGHWAY 28 SALMON, ID 83467													
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00		1. Mailing Address - Correct in this box, if applicable SHEPHERD OF THE VALLEY EVANGELICAL SAM HOVEY CARY SCHWARTZ 178 HIGHWAY 28 SALMON, ID 83467		3. New registered agent signature 													
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="0"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>chairman/ president</td> <td>CARY SCHWARTZ</td> <td>178 Highway 28</td> <td>Salmon</td> <td>ID</td> <td>83467</td> </tr> </tbody> </table>						Office held	Name	Street or P.O. Address	City	State	Zip	chairman/ president	CARY SCHWARTZ	178 Highway 28	Salmon	ID	83467
Office held	Name	Street or P.O. Address	City	State	Zip												
chairman/ president	CARY SCHWARTZ	178 Highway 28	Salmon	ID	83467												
5. Organized under the laws of: IDAHO C 59026		6. Signature  Date <u>10/2/08</u> Name (Typed or Printed) <u>CARY SCHWARTZ</u> Title <u>president</u>															

Issued 9/30/2008 by SL1