

No. C 157325		Reinstatement Annual Report Form ADMIN DISSOLVED 02/08/2011		2. Registered Agent and Office (NOT A P.O. BOX) ANDREW T PLATTE 120 E. LAKE STREET, SUITE 202 SANDPOINT ID 83864	
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. ANDREW T. PLATTE, C.P.A., P.A. ANDREW T. PLATTE 120 E. LAKE STREET, SUITE 202 SANDPOINT ID 83864		3. <u>New</u> Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
PRESIDENT	ANDREW T. Platte	120 E LAKE ST., #202	SANDPOINT	ID	83864
5. Organized Under the Laws of: IDAHO C 157325		6. Signature: <u>Andrew T Platte</u> Date: <u>4/20/11</u> Name (type or print): <u>ANDREW T. PLATTE</u> Title: <u>PRESIDENT</u>			
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