FILED EFFECTIVE

REINSTATEMENT

No. W 66624	Annual Report Form ADMIN DISSOLVED 12/05/2008	2. Registered Agent and Office NOT A P.O. BOX		
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	ADMIN DISSOLVED 12/05/2008 1. Mailing Address - Correct in this box, if applicable HOWE ENTERPRISE, LLC 2205 SAINT EMILION DR HAYDEN, ID 83835	DUSTIN HOWE 2205 SAINT EMILION DR HAYDEN, ID 83835 3. New registered agent signature		
Limited Liability Companies: Enter	Rusiness Addresses of President, Secretary and Directors Names and Addresses of management. erships: Enter names and addresses of at least two (2) partners. Street or P.O. Address 2005 Saint Fin Non Arc Hour 2005 Saint Emilian Onic	<u>City</u> Huydon Heyden	State **J **J **J **J **J **J **J *	Zip 83817 83855
5. Organized under the laws of: IDAHO W 66624	Signature Name (Typed or Ostin Howe	•	12/3/08 ann	
Issued 12/16/2008 by LJM				