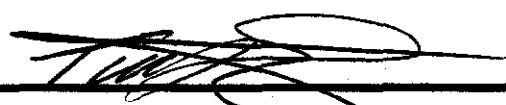


No. W 55534	Reinstatement Annual Report Form ADMIN DISSOLVED 01/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) TIMOTHY J WAGNON 11075 WASHINGTON EMMETT ID 83617	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. CLASSIC AUTO EXPRESS LLC 1607 S WASHINGTON AVE EMMETT ID 83617		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
Member	Tim Wagner	11075, Washington Emmett 20 box 83617		
5. Organized Under the Laws of:	6.			
IDAHO W 55534	Signature:			Date: 1/8/10
	Name (type or print):	Tim Wagner		Title: member
Issued 01/07/2010 by DK1				

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**

Block 3: Only a **new** registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Note:** **Do not put "same as last year" or "same as above". These will not be accepted.**

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.