

No. C 151316	Reinstatement Annual Report Form ADMIN DISSOLVED 01/06/2009		2. Registered Agent and Office (NOT A P.O. BOX) MILDRED L ENZLER 675 SPYGLASS WAY EAGLE ID 83616															
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. MILDRED L. ENZLER CORPORATION MILDRED L ENZLER 675 SPYGLASS WAY EAGLE ID 83616		3. <u>New</u> Registered Agent Signature.															
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td></td> <td><i>pres. ent</i></td> <td><i>Mildred L Enzler</i></td> <td><i>675 spyglass way</i></td> <td><i>Eagle</i></td> <td><i>ID</i></td> <td><i>83616</i></td> </tr> </tbody> </table>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code		<i>pres. ent</i>	<i>Mildred L Enzler</i>	<i>675 spyglass way</i>	<i>Eagle</i>	<i>ID</i>	<i>83616</i>
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5. Organized Under the Laws of: IDAHO C 151316		6. <table border="1"> <tr> <td>Signature: <i>ms Enzler</i></td> <td>Date: <i>10-11-11</i></td> </tr> <tr> <td>Name (type or print): <i>Mildred L Enzler</i></td> <td>Title: <i>10-11</i></td> </tr> </table>			Signature: <i>ms Enzler</i>	Date: <i>10-11-11</i>	Name (type or print): <i>Mildred L Enzler</i>	Title: <i>10-11</i>										
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Issued 10/11/2011 by CLH																		

Gwney/President