

No. C 126057 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 01/06/2011 1. Mailing Address: Correct in this box if needed. JOSEPH I MEIN, ATTORNEY AT LAW, P.A. JOSEPH I MEIN 401 1/2 SHERMAN AVE STE 201 COEUR D'ALENE ID 83814	2. Registered Agent and Office (NOT A P.O. BOX) JOSEPH I MEIN 401 1/2 SHERMAN AVE STE 201 COEUR D'ALENE ID 83814 3. New 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>PRES. JOSEPH I MEIN</td><td>401 1/2 Sherman Ave</td><td>CDA, Id.</td><td>83814</td><td></td><td></td></tr><tr><td></td><td></td><td># 201</td><td></td><td></td><td></td><td></td></tr></tbody></table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code		PRES. JOSEPH I MEIN	401 1/2 Sherman Ave	CDA, Id.	83814					# 201				
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5. Organized Under the Laws of: IDAHO C 126057	6. <table border="1"><tr><td>Signature:</td><td></td><td>Date:</td><td>2/1/11</td></tr><tr><td>Name (type or print)</td><td>JOSEPH I. MEIN</td><td>Title:</td><td>PRES</td></tr></table>		Signature:		Date:	2/1/11	Name (type or print)	JOSEPH I. MEIN	Title:	PRES													
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