

No. W 31951	Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) DEWEY M ROWLAND 2476 E. TIGER LILY DRIVE BOISE ID 83716															
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. ROWLAND FAMILY FINANCIAL L.L.C. DEWEY M ROWLAND 2476 E TIGER LILY DR BOISE ID 83716 USA		3. New Registered Agent Signature.															
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <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>OWNER</td><td>DEWEY ROWLAND</td><td>P.O. BOX 170028</td><td>BOISE</td><td>ID</td><td>83717</td></tr></tbody></table> <i>mgr</i>					Office Held	Name	Street or PO Address	City	State	Country	Postal Code		OWNER	DEWEY ROWLAND	P.O. BOX 170028	BOISE	ID	83717
Office Held	Name	Street or PO Address	City	State	Country	Postal Code												
	OWNER	DEWEY ROWLAND	P.O. BOX 170028	BOISE	ID	83717												
5. Organized Under the Laws of: IDAHO W 31951		6. Signature: <i>[Signature]</i> Name (type or print): DEWEY M. ROWLAND			Date: 10-12-10 Title: <i>mgr</i> OWNER													
Issued 10/12/2010 by JLI																		