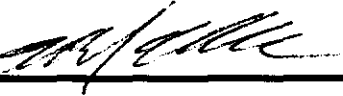
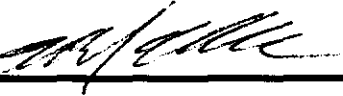
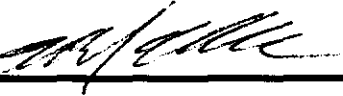


No. J 1520	Reinstatement Annual Report Form LLP REVOKED 02/08/2012		2. Registered Agent and Office (NOT A P.O. BOX) MARK MCCLELLEN 685 KNIGHTS RD MCCALL ID 83638																					
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. HANGAR TWO LLP MARK C. MCCLELLEN 411 F DEINHARD LANE #126 MCCALL ID 83638		3. <u>New</u> Registered Agent Signature.																					
	4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners. <table border="1"><thead><tr><th>Partners</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>MARK MCCLELLEN</td><td>411 F DEINHARD LANE #126</td><td>MCCALL</td><td>ID</td><td>USA</td><td>83638</td></tr><tr><td></td><td>ANNE MACDONALD</td><td>411 F DEINHARD LANE #126</td><td>MCCALL</td><td>ID</td><td>USA</td><td>83638</td></tr></tbody></table>				Partners	Name	Street or PO Address	City	State	Country	Postal Code		MARK MCCLELLEN	411 F DEINHARD LANE #126	MCCALL	ID	USA	83638		ANNE MACDONALD	411 F DEINHARD LANE #126	MCCALL	ID	USA
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5. Organized Under the Laws of: IDAHO J 1520	6. <table border="1"><tr><td>Signature: </td><td colspan="2">Date: 2-22-11</td></tr><tr><td>Name (type or print): MARK MCCLELLEN</td><td colspan="2" rowspan="2">Title: PARTNER</td></tr></table>			Signature: 	Date: 2-22-11		Name (type or print): MARK MCCLELLEN	Title: PARTNER																
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