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No. C 94041	Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2013		2. Registered Agent and Office (NOT A P.O. BOX) TIMOTHY J. KLENA 403 S 11TH ST STE 110 BOISE ID 83702																					
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. KLENA & ASSOCIATES, P.A. TIMOTHY J. KLENA 403 S 11TH STE 110 BOISE ID 83702		3. New Registered Agent Signature.																					
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <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>President</td> <td>Timothy J. Klena</td> <td>403 S. 11TH ST. STE 110</td> <td>Boise</td> <td>ID</td> <td></td> <td>83702</td> </tr> <tr> <td>Vice President</td> <td>Linda C. Klena</td> <td>403 S. 11TH ST. STE 110</td> <td>Boise</td> <td>ID</td> <td></td> <td>83702</td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Timothy J. Klena	403 S. 11TH ST. STE 110	Boise	ID		83702	Vice President	Linda C. Klena	403 S. 11TH ST. STE 110	Boise	ID		83702
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5. Organized Under the Laws of: IDAHO C 94041	6. Signatures TIMOTHY J. KLENA Name (type or print) 			Date: PRESIDENT Title: 3/12/13																				

Issued 03/12/2013 by CJH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM