

REINSTATEMENT

No. W 51025 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	Annual Report Form ADMIN DISSOLVED 08/07/2008 1. Mailing Address - Correct in this box, if applicable CUSTOM CONTRACTING LLC SILVIA A PALACIO 16347 N BLUEBERRY CT NAMPA, ID 38651	2. Registered Agent and Office NOT A P.O. BOX SILVIA A PALACIO 16347 N BLUEBERRY CT NAMPA, ID 38651 NADINE V. VELOZ 844 Bonnie Brae Dr. Nampa, ID 3. New registered agent signature <i>Nadine V. Veloz</i> 83651												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>MEMBER/MANAGER</td> <td>NADINE V. VELOZ</td> <td>844 Bonnie Brae Dr. Nampa</td> <td>NAMPA</td> <td>ID</td> <td>83651</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	MEMBER/MANAGER	NADINE V. VELOZ	844 Bonnie Brae Dr. Nampa	NAMPA	ID	83651
Office held	Name	Street or P.O. Address	City	State	Zip									
MEMBER/MANAGER	NADINE V. VELOZ	844 Bonnie Brae Dr. Nampa	NAMPA	ID	83651									
5. Organized under the laws of: IDAHO W 51025	6. <i>Nadine V. Veloz</i> Signature _____ Date <u>April 4th, 2009</u> Name (Typed or Printed) <u>NADINE V. VELOZ</u> Title <u>Manager</u>													

Issued 9/3/2008 by LJM