


No. <b>W 60270</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/07/2012</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> MICAH L MCCULLOCH 551 S 5TH W ABERDEEN ID 83210																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>	1. <b>Mailing Address: Correct in this box if needed.</b> PAT CONSTRUCTION, LLC PATRICK D MCCULLOCH 2222 WEST 1100 SOUTH STERLING ID 83210 USA		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>PATRICK MCCULLOCH</td> <td>2222W 1100S</td> <td>STERLING ID</td> <td>BING.</td> <td></td> <td>83210</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>MICAH MCCULLOCH</td> <td>551 S. 5<sup>th</sup> W.</td> <td>ABERDEEN ID</td> <td>BING.</td> <td></td> <td>83210</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	PATRICK MCCULLOCH	2222W 1100S	STERLING ID	BING.		83210	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	MICAH MCCULLOCH	551 S. 5 <sup>th</sup> W.	ABERDEEN ID	BING.		83210	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold; font-size: 1.2em;">             IDAHO              W 60270           </div>		6. <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div style="width: 60%;">           Signature:   <hr/>           Name (type or print):  <b>PATRICK D. MCCULLOCH</b> </div> <div style="width: 35%; text-align: right;">           Date:  <b>6-19-12</b>  <hr/>           Title:  <b>MEMBER</b> </div> </div>																																				
Issued 06/14/2012 by LIC																																						