

No. W 106146	Reinstatement Annual Report Form ADMIN DISSOLVED 11/03/2016		2. Registered Agent and Office (NOT A P.O. BOX) MATTHEW K POTRATZ 12280 KENT AVE OROFINO ID 83544	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. 212 DEGREES LLC MATTHEW K POTRATZ 12280 KENT AVE OROFINO ID 83544		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager or Member	Name	Street or PO Address	City	State Country Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	MATTHEW POTRATZ 12280 KENT AVE OROFINO, ID, CLEARWATER 83544			
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
Manager <input type="checkbox"/> Member <input type="checkbox"/>				
5. Organized Under the Laws of:		6.		
IDAHO W 106146		Signature:	Date:	
		<u>MATT POTRATZ</u>	<u>6-15-17</u>	
		Name (type or print):	Title:	
		<u>Matt Potratz</u>	<u>OWNER</u>	

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM