

No. W 27543	Reinstatement Annual Report Form ADMIN DISSOLVED 03/27/2018		2. Registered Agent and Office (NOT A P.O. BOX) MATTHEW A BAKER 4074 E 169 N 5005 E 100 N RIGBY ID 83442 RIGBY, ID 83442
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. MT ENTERPRISES, LLC MATTHEW A BAKER % ALLIED FINANCIAL 4074 E 169 N PO BOX 674 RIGBY ID 83442 USA RERBURG, ID 83440		3. <u>New</u> Registered Agent Signature.

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 type="checkbox"/> Member <input checked="" type="checkbox"/>	MATTHEW BAKER	5005 E 100 N	RIGBY, ID			83442	
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	ASHLYN BAKER	5005 E 100 N	RIGBY, ID			83442	
Manager <input type="checkbox"/> Member <input type="checkbox"/>							
Manager <input type="checkbox"/> Member <input type="checkbox"/>							

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 27543 </div>	6. Signature: <u>Matthew Baker</u> Date: <u>3/27/17</u> Name (type or print): <u>MATTHEW BAKER</u> Title: <u>MEMBER</u>
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Issued 03/27/2018 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM