



03/04/2013 11:58 FAX

<b>No. W 83915</b> Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE          DUE: \$30.00</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 08/07/2012</b>  <b>1. Mailing Address: Correct in this box if needed.</b> MATTS LLC MATT DAME PO BOX 64 GRANGEVILLE ID 83530 130 W. MAIN GRANGEVILLE ID. 83530		<b>2. Registered Agent and Office          (NOT A P.O. BOX)</b> MATTHEW G DAME 501 S. HALL GRANGEVILLE ID 83530  <b>3. New Registered Agent Signature.</b> 																																		
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</b> <table border="1"> <thead> <tr> <th>Manager or Member</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>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>MATT DAME</td> <td>501 S. HALL</td> <td>GRANGEVILLE, ID.</td> <td>USA</td> <td></td> <td>83530</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> <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"/>	MATT DAME	501 S. HALL	GRANGEVILLE, ID.	USA		83530	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  IDAHO W 83915	<b>6.</b> Signature:  Name (type or print): <u>MATT DAME</u> Date: <u>3-5-13</u> Title: <u>OWNER</u>																																				

Issued 03/04/2013 by SLD

**INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM**