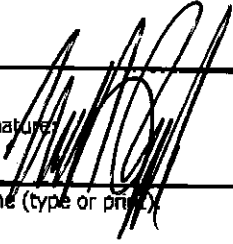


No. W 55643 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 01/14/2013 1. Mailing Address: Correct in this box if needed. MP HOME AND ASSOCIATION MAINTENANCE LLC MATT PUGLIA PO BOX 4721 <i>2940 Beaver Brook Dr</i> HAILEY ID 83333	2. Registered Agent and Office (NOT A P.O. BOX) MATT PUGLIA 2940 BEAVER BROOK DR HAILEY ID 83333 3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td><i>Matthew Puglia</i></td> <td><i>2940 Beaver Brook</i></td> <td><i>Hailey</i></td> <td><i>ID</i></td> <td></td> <td><i>83333</i></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 checked="" type="checkbox"/> Member <input type="checkbox"/>	<i>Matthew Puglia</i>	<i>2940 Beaver Brook</i>	<i>Hailey</i>	<i>ID</i>		<i>83333</i>	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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5. Organized Under the Laws of: IDAHO W 55643	6. Signature:  Name (type or print): _____ Date: <i>1-28-13</i> Title: _____																																				

Issued 01/22/2013 by DK1

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM