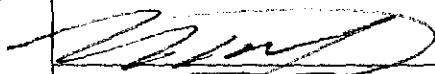


No. C 25221	Reinstatement Annual Report Form ADMIN DISSOLVED 12/16/2014		2. Registered Agent and Office (NOT A P.O. BOX) MIKE LAVIGNE
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. MASCOT MINES, INC. KIMBERLY J SAMUELSON 602 CEDAR ST 60022 SILVER VALLEY RD Box 5 WALLACE ID 83873		KIMBERLY SAMUELSON 602 CEDAR ST. 60022 SILVER VALLEY RD SUITE # 205 WALLACE ID 83873  3. New Registered Agent Signature.

Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pri

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	RICK JASPER	JASPER'S RESTAURANT	ST. REGIS	MT	USA	59866
DIRECTOR	MARTIN CLEMENTS	HC 01 BOX 246	KELLOGG	ID	USA	83837
DIRECTOR	KIMBALL BARNARD	1703 E. PINECREST RD.	SPOKANE	WA	USA	99203
DIRECTOR	MILTON DATSOPOULOS	201 W. MAIN	MISSOULA	MT	USA	59802
DIRECTOR	MIKE LAVIGNE	602 CEDAR STREET, SUITE #205	WALLACE	ID	USA	83873
PRESIDENT	JOSEPH J. WALLACE	PO BOX 636	OSBURN	ID	USA	83849
SECRETARY						

5. Organized Under the Laws of:

IDAHO
C 25221

6.

Signature:

Name (type or print)

JOSEPH J. WALLACE

Date:

4-10-15

Title:

PRESIDENT

Issued 04/02/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM