




No. <b>W 108254</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 02/11/2013</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> CARMA PHILLIPS <del>7650 N STAR RD</del> <del>MERIDIAN ID 83646</del>																																			
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. CMDT, LLC <del>7650 N STAR RD</del> 1877 Horse shoe Canyon Dr <del>MERIDIAN ID 83646</del> Middleton ID 83644		<div style="font-size: 2em; font-weight: bold;">FILED</div>																																			
<b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td colspan="6">Carma Phillips 1877 Horse shoe Canyon Dr.</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6">Middleton ID 83644</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td colspan="6"></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"/>	Carma Phillips 1877 Horse shoe Canyon Dr.						Manager <input type="checkbox"/> Member <input type="checkbox"/>	Middleton ID 83644						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:  <div style="text-align: center; font-weight: bold;">IDAHO</div> <div style="text-align: center; font-weight: bold;">W 108254</div>	6. <table style="width: 100%;"> <tr> <td style="width: 50%;">           Signature:   </td> <td style="width: 50%;">           Date:            8/9/17         </td> </tr> <tr> <td>           Name (type or print):            Carma Phillips         </td> <td>           Title:            member         </td> </tr> </table>			Signature: 	Date: 8/9/17	Name (type or print): Carma Phillips	Title: member																															
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