

No. <b>W 139102</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 09/22/2015</b>		<b>2. Registered Agent and Office</b> <b>(NOT A P.O. BOX)</b> MICHAEL WEIR 3739 E LOOKOUT DR COEUR D ALENE ID 83815																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT FEE</b> <b>DUE: \$30.00</b>			<b>1. Mailing Address: Correct in this box if needed.</b> M1 ENTERPRISES, LLC MICHAEL WEIR 3739 E LOOKOUT DR COEUR D ALENE ID 83815	<b>3. <u>New</u> 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 checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>Michael Weir</td> <td>3739 E. Lookout Dr.</td> <td></td> <td></td> <td></td> <td>COEUR D'ALENE, ID 83815</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 checked="" type="checkbox"/></td> <td>John Gill</td> <td>5840 SR 60 EAST</td> <td></td> <td></td> <td></td> <td>PICANT CITY, FL 33567</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"/>	Michael Weir	3739 E. Lookout Dr.				COEUR D'ALENE, ID 83815	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	John Gill	5840 SR 60 EAST				PICANT CITY, FL 33567	Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<b>5. Organized Under the Laws of:</b>  IDAHO W 139102		<b>6.</b> Signature: <u>Michael Weir</u> Name (type or print): <u>Michael Weir</u> Date: <u>5/02/16</u> Title: <u>Manager</u>																																				
Issued 05/02/2016 by online																																						