

No. <b>C 172322</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 06/04/2009</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) DEBORA A REECE 1850 E DUFOUR RD SAGLE ID 83860 <i>1804 4th St          Amesbury ID 83850</i>				
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT          FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed.  CLIFF REECE TRUCKING, INC. CLIFF H REECE PO BOX 565 <i>525</i> SMELTERVILLE ID 83868		3. <u>New</u> Registered Agent Signature. <i>Debra A Reece</i>				
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and (optional) Treasurer.							
Office Held	Name	Street or PO Address	City State Country Postal Code				
<i>President Cliff H Reece PO Box 565 Smelterville ID USA 83868</i>							
5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold;">IDAHO C 172322</div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; border-bottom: 1px solid black;">           Signature: <i>Cliff H. Reece</i> </td> <td style="width: 30%; border-bottom: 1px solid black;">           Date: <i>10-20-11</i> </td> </tr> <tr> <td style="border-bottom: 1px solid black;">           Name (type or print): <i>Cliff H. Reece</i> </td> <td style="border-bottom: 1px solid black;">           Title: <i>President</i> </td> </tr> </table>		Signature: <i>Cliff H. Reece</i>	Date: <i>10-20-11</i>	Name (type or print): <i>Cliff H. Reece</i>	Title: <i>President</i>
Signature: <i>Cliff H. Reece</i>	Date: <i>10-20-11</i>						
Name (type or print): <i>Cliff H. Reece</i>	Title: <i>President</i>						
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