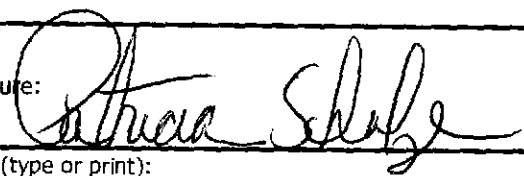


| No. C 185361 | Reinstatement Annual Report Form ADMIN DISSOLVED 03/07/2016 | | 2. Registered Agent and Office (NOT A P.O. BOX) PATRICIA SCHULZE 1108 A ALBENI HWY PRIEST RIVER ID 83856 | | | | | | | | | | | | | | | | | | | | | |
|--|---|----------------------|---|-------|----------------------|-------------|-------|---------|-------------|------|------------------|---------|--------------|----|---------|-------|-----|------------------|---|---|---|---|---|---|
| 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. P AND L ENTERPRISES, INC. PATRICIA SCHULZE PO BOX 368 PRIEST RIVER ID 83856 USA | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</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>PRES</td> <td>PATRICIA SCHULZE</td> <td>Box 368</td> <td>PRISTIAUSSEN</td> <td>SD</td> <td>BOONSEN</td> <td>83856</td> </tr> <tr> <td>SEC</td> <td>LAURENCE SCHULZE</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table> | | | Office Held | Name | Street or PO Address | City | State | Country | Postal Code | PRES | PATRICIA SCHULZE | Box 368 | PRISTIAUSSEN | SD | BOONSEN | 83856 | SEC | LAURENCE SCHULZE | " | " | " | " | " | 3. <u>New</u> Registered Agent Signature. |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | | | | | | | | | | | | | | | | | | |
| PRES | PATRICIA SCHULZE | Box 368 | PRISTIAUSSEN | SD | BOONSEN | 83856 | | | | | | | | | | | | | | | | | | |
| SEC | LAURENCE SCHULZE | " | " | " | " | " | | | | | | | | | | | | | | | | | | |
| 5. Organized Under the Laws of: IDAHO C 185361 | 6. Signature:  Name (type or print): PATRICIA SCHULZE | | Date: 3/17/16 Title: PRES | | | | | | | | | | | | | | | | | | | | | |

Issued 03/16/2016 by online

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