

No. W 127906	Reinstatement Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	ADMIN DISSOLVED 11/03/2016 1. Mailing Address: Correct in this box if needed. C & T TRUCKING LLC 30333 HOT SPRINGS RD BRUNEAU ID 83604		CLAUDE L MILLS 30333 HOT SPRINGS RD BRUNEAU ID 83604-8360																																			
REINSTATEMENT FEE DUE: \$30.00			3. New Registered Agent Signature. 																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<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 ☒ Member ☐</td> <td>TERI L MILLS</td> <td>30333 HOTSPRINGS RD</td> <td>BRUNEAU</td> <td>ID</td> <td></td> <td>83604</td> </tr> <tr> <td>Manager ☒ Member ☐</td> <td>Claude L Mills</td> <td>30333 HOTSPRINGS RD</td> <td>BRUNEAU</td> <td>OWHNEE</td> <td></td> <td>ID OWHNEE 83604</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager ☐ Member ☐</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 ☒ Member ☐	TERI L MILLS	30333 HOTSPRINGS RD	BRUNEAU	ID		83604	Manager ☒ Member ☐	Claude L Mills	30333 HOTSPRINGS RD	BRUNEAU	OWHNEE		ID OWHNEE 83604	Manager ☐ Member ☐							Manager ☐ Member ☐						
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5. Organized Under the Laws of: IDAHO W 127906	6. Signature:  Date: <u>7-30-18</u> Name (type or print): <u>TERI L MILLS</u> Title: <u>Manager</u>																																					