# State of Idaho

Office of the Secretary of State

### LIMITED LIABILITY COMPANY REINSTATEMENT CERTIFICATE

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that the certificate of organization of **TRUE BLUE PRODUCTS**, **LLC**, file number W 107740, a limited liability company organized under the laws of the State of Idaho, was administratively dissolved on January 16, 2015, for failure to file the required annual report form by the date due.

1 FURTHER CERTIFY That the limited liability company has on January 27, 2015, been reinstated on the records of this office, and that its certificate of organization in the State of Idaho are hereby restored.

Dated: January 27, 2015



SECRETARY OF STATE

By 1000 Samour



## APPLICATION FOR REINSTATEMENT

To the SECRETARY OF STATE, STATE OF IDAHO

SECRETAR PHY STATE TIVE

1. The name of the Idaho limited liability company applying for reinstatement following administrative dissolution of forteiture, available, is:

#### TRUE BLUE PRODUCTS, LLC

- 2. The date of its organization was: October 21, 2011
- The limited liability company hereby applies for reinstatement. If the entity name is unavailable, a certificate of amendment for a name change must be attached.

Signature:		 	
Manager or Member:		 •	
Manager	·	 	
Date: ( 27(15			
(must be signed by a manager or member of the LLC)		<u> </u>	-

Secretary of State use only

1DAHO SECRETARY OF STATE 01/27/2015 05:00

CK:2526532 CT:172099 BH:1459035 16 30.00 = 30.00 CORP REINS #2 Idaho Secretary Of State PO Box 83720 Boise, ID 83720-0080

2526532 - Card Present Transaction Order #2526532:01/27/2015 03:05 PM Sale By: JL, Corporations Division

Visa XXXX XXXX XXXX 9977

Your credit card statement will show that Access Idaho has billed you for:

TRUE BLUE PRODUCTS LLC

Reinstatement 1 @ 30.00 30.00

Subtotal: \$ 30.00 Sales Tax: \$ 0.00

Vendor Processing Fee: \$ 1.00

Total: \$ 31.00

MICHAEL AIELLO 5720 W OVERLAND RD MERIDIAN, ID 83642 ph: 208-887-9948

I AGREE TO PAY THE ABOVE AMOUNT ACCORDING TO CARD ISSUER.

SIGNATURE:

## **CUSTOMER COPY**

RETURN POLICY:

For all questions regarding this transaction please call (208)334-2300.

Thank You!