No. C 83012	Reinstatement Annual Report Form ADMIN DISSOLVED 04/21/2015	2. Registered Agent and Office (NOT A P.O. BOX) ~~ADAM H GOYEN~~ Angelica Manke 329 S WOODRUFF IDAHO FALLS ID 83401
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. RAMIK PLUMBING INC. ~~ADAM H GOYEN~~ Angelica Manke 329 S. WOODRUFF IDAHO FALLS ID 83401	3. New Registered Agent Signature. Angelica Manke

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	Angelica Manke	329 S Woodruff	Idaho Falls,	ID		83401
Director	Angelica Manke	329 S. Woodruff	Idaho Falls,	ID		83401

5. Organized Under the Laws of:	6.
IDAHO C 83012	Signature: Angelica Manke Date: 5/5/2015 Name (type or print): Angelica Manke Title: President

Issued 05/05/2015 by online

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM